RC 4412 (1) TUNBRIDGE WELLS

BOROUGH OF ROYAL TUNBRIDGE WELLS.

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH

AND THE

SCHOOL MEDICAL OFFICER

For the Year 1914.

F. C. LINTON, M.A., M.B., Ch.B., D.P.H.

Tunbridge Wells:
BALDWIN, GROSVENOR WORKS.

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BALDWIN, GROSVENOR WORKS.

To the Mayor, Aldermen and Burgesses of Royal Tunbridge Wells.

Gentlemen,

I beg to present to you my Annual Report upon the work of the Health Department and of the School Medical Department for the year 1914.

After a short period of holiday duty for my predecessor at the end of 1913, I formally commenced my duties as Medical Officer of Health on January 1st, 1914.

During the year some important changes took place in the structure and staff of the Department, with corresponding facilities for meeting the increased amount of work which presented itself at that time. I take this opportunity to express my thanks to the Chairman and Members of the Health and Education Committees for the sympathetic and practical manner in which they met my representations and carried out these necessary changes, and I should also here like to acknowledge my gratitude to the members of my own staff for the zealous manner in which they performed their duties, not only during, but frequently much beyond, office hours, and also to mention my indebtedness to my colleagues in the other Departments of the Corporation, one and all of whom have rendered me valuable assistance.

I am,

Yours obediently,

F. C. LINTON.

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BOROUGH OF ROYAL TUNBRIDGE WELLS.

Health Committee:*

Mr. Alderman CARPENTER (Chairman).
The MAYOR (Mr. Councillor C. W. Emson).

Mr. Alderman CALEY.
Mr. Councillor STAMFORD.
Mr. Councillor EDWARDS.
Mr. Alderman GOWER.
Mr. Alderman SNELL.
Mr. Councillor WILLMOT.

Education Committee:*

The Ven. Archdeacon SCOTT (Chairman).
The MAYOR (Mr. Councillor C. W. Emson).

Mr. Alderman ELWIG.
Mr. Alderman SILCOCK.
Mr. Councillor BERWICK.
Mr. Councillor SCOTT BLAIR.
Mr. Councillor FOSTER.
Councillor Col. HUNTER, C.S.I.
Mr. Councillor PASSINGHAM.
Mr. Councillor STAMFORD.
Mr. Councillor WESLEY SMITH.
Mr. Councillor WEARE.
Mr. Councillor WILLMOT.
Mrs. ABBOTT.
Miss BARNETT.
The Rev. Canon D. J. STATHER HUNT, M.A.
The Rev. W. USHER, M.D.
Mr. A. I. KING.
Mr. T. HAUGHTON WATSON, B.A.

Staff of the Public Health and School Medical Departments:

Chief Sanitary Inspector:

JAMES CAVE, A.R.S.I., A.R.I.P.H.

Inspectors:

E. J. WELLS, A.R.S.I.
W. P. CAVE, A.R.S.I.
E. READER.

Clerk:

F. HICKS.

Junior Clerk:

P. STEVENS.

School Nurses and Health Visitors:

Miss J. WHYTE.
Miss E. BROCKLEHURST.

Matron of the Isolation Hospital:

Miss J. M. SMITH.

Public Analyst:

A. H. M. MUTER, F.I.C.

Medical Officer of Health, School Medical Officer, and Bacteriologist:

F. C. LINTON, M.A., M.B., Ch.B., D.P.H., Captain R.A.M.C. (T.)

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* The present constitution of Committees is given above.

SUMMARY OF STATISTICS FOR 1914

Population Estimated to the middle of the Year, 36,460.

Area of the Borough, 3,991 acres.

Rateable Value, £296,502.

Census 1911.
Population, 35,703.
Number of Inhabited Houses, 7,671.
Average Number of Persons per House, 4·6.
Density of Population, 8·9 Persons per acre.

Number of Deaths 504.

Crude Death-rate per thousand, 13·8. Average for previous ten years, 12·1. Death-rate corrected for age and sex constitution, 12·0.

Number of Deaths from Zymotic Diseases, 26. Death-rate from Zymotic Diseases, 0·9 per thousand of the population.

Death-rate from Phthisis, 0·77 per thousand living.

Death rate from Tuberculosis, all forms, 1·07.

Number of Births. Boys, 263; Girls, 242; total, 505.

Birth-rate per thousand, 13·8. Average for the previous ten years, 17·4.

Infantile Mortality, 66·0 per thousand born. Average for the previous ten years, 74·2.

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A.—NATURAL AND SOCIAL CONDITIONS OF THE DISTRICT.

(1) *Physical Features and General Character.*

The Borough of Royal Tunbridge Wells is situated on the ridges and slopes of a series of low hills surrounding the hollow in which the historic mineral springs take their origin, the only outlet being a narrow valley running westward. It lies in the extreme south-west corner of Kent, 34½ miles from London. The Parish of Broadwater Down, with its houses nestling close to the pines of Broadwater Forest, is actually in the County of Sussex, though for administrative purposes it is considered along with the rest of the Borough as belonging to Kent. The altitudes vary from 400 to 500 feet above sea level to as little as 200 feet in the neighbourhood of the Pantiles, where sheltering hills afford protection from all winds save the west. The variations in altitude and aspect in different parts of the Borough are accordingly so great that it is possible without travelling far in any direction to obtain a climate relatively bracing or relatively sheltered.

In any neighbourhood the character of the vegetation is governed by the nature of the soil. In Tunbridge Wells the sub-soil is composed of a layer, known geologically as the Sandstone layer of the Hastings Beds, with here and there a gravelly pocket or a pocket of clay super-imposed. The surface soil is composed of sand, clay and organic matter and is therefore very fertile, as is indicated by the wealth and variety of trees and flowers, both natural and cultivated, which flourish in the neighbourhood. The Common, which is in the midst of the Borough, and its continuation Rusthall Common are gorse-clad and dotted with clusters of pine trees and trees of other varieties. From the ridge of Mount Ephraim, on whose southern slopes the Common lies, a view extends southwards over wide areas of woodlands to Crowborough Beacon and northwards across the flat valley of the Weald to the distant line of the North Downs—a picture not easily equalled. As is usual in a neighbourhood in which sandy soil predominates there are large pine forests and heath-clad areas: these culminate in the ridges of Ashdown Forest, lying to the Southwest, in the direction from which come the prevailing winds. The climate is a singularly bracing one on account of the considerable elevation above sea-level of the greater part of the Borough, though, as previously remarked, sheltered areas are to be found.

Meteorological Notes. Arrangements were made for the establishment of a Municipal Meteorological Station during the year, and the keeping of the records has been undertaken by the Staff of the Health Department. After careful consideration of different sites, a suitable one for the setting up of the instruments was selected in that portion of Calverley Park which is leased to the owners of the Calverley Hotel, who kindly gave permission for its use. The site was approved by the Meteorological Office, and records have been kept continuously from July 1st, 1914. A suitable site was also selected for the setting up of the sunshine recorder, namely, on the roof tower of the Earl's Court Hotel, on Mount Ephraim, the owners of which kindly gave the necessary permission: this situation permits of a record of all bright sunshine from sunrise to sunset, and is therefore well suited to the purpose. The instruments in use are those which the late Dr. Smart's Trustees presented to the Borough, replaced in a few instances by new ones. In every case the old instruments were re-tested and fresh certificates obtained from the National Physical Laboratory.

I am indebted to Mr. W. Sturt, The Pantiles, for his records up to June 30th ; the records for the remainder of the year are those of the Municipal Station.

The total amount of sunshine recorded was 1,823 hours 12 minutes. The mean is 1,671 hours 42 minutes. The most sunny day was June 3rd, when 15 hours 12 minutes were recorded. There were 55 sunless days, 60 being the average.

The sunshine record in :—

		hrs.	min.		hrs.	min.
January	was	78	30	the average being	56	6
February	,,	108	48	,, ,,	77	36
March	,,	98	54	,, ,,	131	6
April	,,	236	24	,, ,,	171	54
May	,,	205	12	,, ,,	213	0
June	,,	279	42	,, ,,	201	54
July	,,	182	24	,, ,,	221	0
August	,,	207	48	,, ,,	228	54
September	,,	223	54	,, ,,	187	6
October	,,	83	30	,, ,,	107	0
November	,,	85	48	,, ,,	69	54
December	,,	32	18	,, ,,	44	0

10 hours of sunshine were first recorded on March 31st.
11 ,, ,, ,, ,, March 31st.
12 ,, ,, ,, ,, April 12th.
13 ,, ,, ,, ,, April 18th.
14 ,, ,, ,, ,, May 17th.
15 ,, ,, ,, ,, June 3rd.
15 ,, ,, last ,, June 30th.
14 ,, ,, ,, ,, June 30th.
13 ,, ,, ,, ,, August 12th.
12 ,, ,, ,, ,, September 2nd.
11 ,, ,, ,, ,, September 6th.
10 ,, ,, ,, ,, September 25th.

The greatest heat in the sun was 141.7 degrees on July 14th.

It first	reached	140	degrees on	July 14th.
last	,,	140	,,	July 14th.
,,	,,	130	,,	September 5th.
,,	,,	120	,,	October 3rd.
,,	,,	110	,,	November 10th.
,,	,,	100	,,	November 10th.

The greatest heat in the shade was 86.2 degrees on July 1st.

It first	reached	60	degrees on	March 31st.
,,	,,	70	,,	April 20th.
,,	,,	80	,,	June 30th.
last	,,	80	,,	September 3rd.
,,	,,	70	,,	September 26th.
,,	,,	60	,,	November 6th.

The lowest temperature 4ft. above ground was 21 degrees on January 24th.

The hottest night was September 8th, when the thermometer did not go below 62.0

The Mean Temperature of the Year was 50.6, the average being 48.14.

The Mean daily range was 14.6; the average being 14.5 degrees.

The Mean Temperature of each month was :—

January	was	37·0	degrees,	the average	being	37.0	degrees.
February	,,	43·4	,,	,,	,,	38·6	,,
March	,,	38·2	,,	,,	,,	41·2	,,
April	,,	50·0	,,	,,	,,	46·1	,,
May	,,	53·3	,,	,,	,,	51·7	,,
June	,,	59·6	,,	,,	,,	57·8	,,

July	was	62·2	degrees,	the average	being	60·9	degrees
August	,,	62·7	,,	,,	,,	60·4	,,
September	,,	57·5	,,	,,	,,	57·0	,,
October	,,	51·9	,,	,,	,,	49·2	,,
November	,,	44·9	,,	,,	,,	43·0	,,
December	,,	42·1	,,	,,	,,	38·4	,,

The last frost in the air in spring was on April 26th. The first in the autumn was on September 30th. The first on the grass in the autumn was on September 22nd. There were 47 frosts in the air, the average is 65.

The Temperature of the soil at the depth of one foot and four feet was not recorded during the first half of the year, the latter half is given below.

At one foot	it last reached	60	degrees on	September 11th.
,,	,,	50	,,	November 11th.
four feet	,,	60	,,	September 15th.
,,	,,	50	,,	November 20th.

The Mean Temperatures for the months were as under :—

	1 foot.		4 feet.	
July	63·3	degrees	58·8	degrees.
August	62·1	,,	59·8	,,
September	60·9	,,	59·5	,,
October	52·8	,,	55·6	,,
November	46·3	,,	51·1	,,
December	44·0	,,	46·8	,,

The Wind at 9 a.m. was N. 30 days ; N.E., 36 days ; E., 42 days ; S.E., 22 days ; S., 45 days ; S.W., 79 days ; W., 66 days ; N.W., 35 days. It was variable on 9 days. One day was calm.

The Rainfall amounted to 30.95 inches, the average being 29.99 inches. It fell on 170 days, the average being

172. The most rain that fell on one day was 1.66 inches on December 9th.

The rainfall in :—

January	was	0·64	inches,	the average	being	2·47	inches.
February	,,	4·39	,,	,,	,,	2·25	,,
March	,,	5·41	,,	,,	,,	2·20	,,
April	,,	1·27	,,	,,	,,	1·94	,,
May	,,	1·00	,,	,,	,,	1·87	,,
June	,,	0·34	,,	,,	,,	2·18	,,
July	,,	1·29	,,	,,	,,	2·27	,,
August	,,	0·85	,,	,,	,,	2·44	,,
September	,,	0·91	,,	,,	,,	2·33	,,
October	,,	2·19	,,	,,	,,	3·65	,,
November	,,	4·14	,,	,,	,,	3·35	,,
December	,,	8·52	,,	,,	,,	3·04	,,

It is noteworthy that the figure for December is larger than any previously recorded for that month in the Borough.

(2) *Social Conditions including the Chief Occupations of the Inhabitants ; the influence of any particular occupation on the Public Health ; the Amount of Poor-Law Relief and the extent to which Hospital and other forms of gratuitous relief are utilised.*

There are no large factories or works in Tunbridge Wells ; it is to the beauty and diversity of the scenery of the Borough and its environment as well as to the pure atmosphere, unpolluted by the smoke of factory chimneys, that the Borough owes its present popularity as a residential place and as a health and holiday resort. Details as to the occupation of the industrial population will be found under Section B.

Poor-Law Relief. The cost of Outdoor relief in the Parish of Tunbridge Wells was £1,860 13s. 6d. during 1914 as compared with £2,044 6s. 10d. in 1913.

Medical Charities. Tunbridge Wells is richly supplied with Institutions for the relief of suffering and sickness.

There is a large General Hospital which caters for the wants of the population not only of the Borough but of a wide area around.

It is well equipped and supplied with the most up-to-date appliances, having a department for electrical massage, light (both X-ray and Finsen light installations are employed), and radium treatment.

During 1914 the number of In-patients was 870 as compared with 756 in 1913. During the latter half of the year many wounded soldiers, both English and Belgian, were treated in the Institution. The Out-patients numbered 4,707, making 30,670 attendances, as compared with 4,614, making 27,396 attendances in the previous year. A large amount of work was done in connection with the newly-established Dental Department in the Hospital.

THE EYE AND EAR HOSPITAL. The number of Out-patients treated during the year was 2,790, making 6,622 attendances. The In-patients numbered 365. A large number of the poorer patients were supplied with spectacles through the "Spectacle Fund" in connection with letters from the Royal Surgical Aid Society.

THE HOMŒOPATHIC HOSPITAL AND DISPENSARY. Ninety four patients were treated in the In-patients' department of this Hospital during 1914, and 848 Out-patients made 3,825 attendances at the Hospital during the year.

THE PROVIDENT DISPENSARY had 2,074 members on its books, showing an increase of 21 on the previous year's figures; of these 1,393 are above the age of 14 and 681 are under that age.

The District Nursing Association. 11,857 visits were paid during the year by the Superintendent and Nurses of the District Nursing Association. The Staff was, on the outbreak of war, depleted, and there was a shortage for some time on account of the universal and urgent demand for nurses occasioned by the claims of Military Service.

At the present time, when there are so many and large demands for subscriptions and donations, it is to be hoped that the claims of this Institution will not be overlooked, as the work there performed, at all times useful, is perhaps now more necessary than it has ever been.

The Royal Surgical Aid Society continues to do valuable work ; 1,204 patients having received relief and 1,386 appliances having been supplied during the year 1914.

The Charity Organisation Society during the year disbursed in pensions the sum of £619 and for special cases the sum of £299 5s. 10d.

The Invalid Children's Aid Branch of this Society assisted in all 76 children during the year ; nine children were sent to a convalescent home or special hospital and 14 were boarded out.

I take this opportunity to express my thanks to the Secretaries of the various Societies for furnishing the above information.

B.—SANITARY CIRCUMSTANCES OF THE DISTRICT.

The water supply of Tunbridge Wells is drawn from springs and Artesian wells, and as these springs are situated in unfrequented woodland areas, in which inhabited buildings are few and distant, the risk of pollution is well guarded against. For roughly one half of the year the supply of water from the springs suffices for the Borough requirements.

During the remaining portion of the year artesian borewells, six in number, give an ample and pure supply of water to supplement the flow from the springs. The Artesian wells are situated at Pembury, where there is a large reservoir, capable of holding 42,000,000 gallons. The iron contained in solution in this deep well water is effectively removed by the use of Candy Oxidising Pressure Filters, six in number.

The Artesian wells are bored through the Wadhurst clay and take their water supply from the Ashdown sands; the nearest point at which the Ashdown sands reach the surface is some miles distant from the bore wells. The water enters six open filter beds at Pembury, having an area of about one acre.

An analysis, made by the Borough Analyst, Mr. Muter, on March 24th, 1914, which may be taken as a type of the analyses obtained of the Tunbridge Wells water supply for that year, reads as follows :—

Determination.	*Parts per* 100,000
Free and Saline Ammonia ...	None.
Albuminoid Ammonia	0·0030
Oxygen absorbed in 15 minutes	0·0036
at 80 deg. F. in 4 hours ...	0·0085
Nitric Nitrogen	0·49
Chlorine	2·4
Equivalent to Sodium Chloride	4·9
Total Solid Matter (dried at 180 deg. C.)	12·5
Temporary Hardness	3·0
Permanent Hardness	3·5
Appearance in two foot tube ...	Colourless and clear.
Metals (Lead, Copper, Zinc, Iron)	Trace of iron.

(*Signed*) A. H. M. MUTER.

It will be observed that the iron contained in solution in the sample which was taken from the 15in. main in Pembury Road, is reduced to a trace.

Bacteriological Examination.

Number of Organisms per cubic centimetre capable of growing on standard gelatine in 4 days at 20 deg. C.	5
Number of Organisms per cubic centimetre capable of growing on standard agar-agar at 37 deg.—38 deg. C.	0
B. Coli Communis—	
1 c.c.	Absent in all cases.
10 c.c.	
50 c.c.	

The results of both chemical and bacteriological examinations show the water to be remarkably pure and to be a drinking water of the best quality.

There are approximately 90 miles of water mains in the Borough. The average daily supply per head is 23 gallons, and during the year 26 additional houses were supplied with town water.

In addition to the main water supply in Tunbridge Wells there are the well-known Chalybeate Springs at the Pantiles. Frequent examinations, both chemical and bacteriological, of this water were made during the course of the year, and in all cases the analyses showed that the waters were in a pure and satisfactory state.

Rivers and Streams.—All the water courses in the Borough are small in volume, and periodic inspections of these showed them to be in a satisfactory state.

Drainage and Sewerage.

The Borough sewage drains towards two sewage farms, one at the northern end of the town and the other at the southern. The North Sewage Farm is 187 acres in extent, and the South Farm 197 acres. At the South Farm a portion of the sewage is dealt with by means of percolating bacteria beds. Analyses of the sewage effluents of both farms are frequently made and give satisfactory results.

A portion of the sewage, mainly from the slopes of the ridge Mount Ephraim, is dealt with by pumping across to join the sewage which proceeds to the Southern Farm.

MAIN SEWERS, NEW HOUSES, ETC.—The Borough Surveyor informs me that main sewers in the following streets have either been provided, reconstructed, or repaired :

New Sewer—High Street.

Sewers repaired in Molyneux Park Road, Goods Station Road, Mount Ephraim, London Road, Silverdale Road, Northern Outfall, St. James' Road, Whitefield Road, Kent Road, Hungershall Park, Upper Grosvenor Road, Montacute Gardens, Southern Outfall Sewer. The sewer at the top of Frant Road has been extended.

All flat gradients are flushed periodically from manholes.

Twenty-nine new houses have been built, and 29 Road Gullies have been reconstructed and trapped.

Closet Accommodation and Scavenging.

There are no privies in the Borough and a very small number of earth closets, chiefly in connection with gardeners' cottages in outlying districts. Water closets are gradually being modernised, but there is still in existence a large number of the boxed-in type, now being replaced wherever possible by pedestals.

Refuse, both domestic and trade, is collected and removed in covered carts, once in five days. From all premises where more frequent removal is necessary, trade refuse is collected daily. Whilst the troops have been living in considerable numbers in large empty houses, the refuse has been removed from these houses daily. The refuse is conveyed to refuse tips situated at the High Brooms Bricks Works Pit, the Forest Brick Works, the Brickworks, Hawkenbury, and near the Rusthall Allotments.

In a Health Resort like Tunbridge Wells it is to be hoped that in the near future arrangements will be made to establish a refuse destructor. The initial cost of doing so has proved a deterrent in many places, but as regards the working, the annual cost can be relatively economised by making use of the heat generated : for instance, in running a central disinfector, for which there is also a considerable need in the town. A small cleansing station with one or two baths could be readily established on the same premises with such a destructor and the heating for the whole could be obtained from the refuse destructor. Such a scheme would prove to be an important step in advance in promoting the sanitation, cleanliness and health of the Borough.

There are a few isolated houses draining into cesspools ; these are emptied by the owners at special hours, as required by bye-laws ; the emptying and disposal is superintended by the Sanitary Staff.

The drainage of all new buildings is laid down upon sound sanitary lines under the supervision of the Borough Surveyor, the water test being applied to drains and the smoke test to sanitary fittings before approval.

Re-construction of house drains and sanitary fittings are subjected to the same tests under the supervision of the Sanitary Staff, who also take the plan of the house to scale and transfer the same into plan books with full particulars of works done. This work takes up time, but the records thus kept are valuable to ourselves, and will be still more valuable to our successors.

There are in the town about 9,800 W.C.'s with water laid on, about 60 hand flushed and about 40 pail earth closets. There are no vault or privy middens or waste water closets. There are about 43 houses whose occupants share W.C. accommodation with others.

Sanitary Inspections of District.

Much useful work has been done in continuation of the regular routine, which has been carried out with unremitting energy by those entrusted with it.

The method generally adopted is to obtain an interview with the person responsible for abating a nuisance or default, and to endeavour to persuade him that statutory notices cause friction, and that it is far better to recognise responsibility and to forthwith carry out any necessary work; this mode of procedure is on the whole successful.

During the year under review 470 houses, drains and sanitary fittings have been inspected, and in consequence 657 interviews with agents and owners have taken place; 18 statutory notices and 127 ~~formal~~ informal notices have been served and the result of the interviews and notices served is shown by the number and variety of the works carried out and enumerated in appended tables. In regard to the occupiers of cottage dwellings it is the practice of the staff of the Health Department to give advice, to supply information and illustration as opportunity arises in order to convince them of the desirability of improvement in their domestic habits and arrangements. Legislation only does a part of this work, and general lasting improvement can only be brought about by a change in the habits of some of the persons concerned, and by the co-operation of all members of the community. Much time has been devoted to combined drainage, and no one but those engaged on this work can realise the difficulties that have to be contended with when carrying out negotiations. The present legal position is complicated and it is to be hoped that amendments simplifying the existing law may be introduced.

The following Tables present a summary of the work performed by the Sanitary Inspectors during 1914.

49	Complaints received and investigated.
18	Premises in respect of which statutory notices have been served.
127	Premises in respect of which informal notices have been served.
470	Houses, drains and sanitary fittings inspected.
2193	Visits of re-inspection or to works in course of progress.
44	Drains re-constructed.
33	Drains repaired.
21	Choked drains cleared and cleansed.
72	Inspection chambers constructed.
21	Inspection chambers repaired.
43	Drain ventilation shafts erected or repaired.
19	Soil pipes erected.
12	Soil pipes repaired.
79	W.C.'s re-constructed and provided with flushing apparatus.
20	Flushing apparatus repaired.
189	Efficient traps substituted for inefficient ones.
109	Rain-water and waste pipes disconnected from drains and made to discharge over properly trapped gullies.
87	Yards and areas paved or paving repaired.
2	New w.c. buildings and apparatus constructed.
41	W.C.'s cleansed and repaired.
47	New sinks provided.
14	New lavatory basins provided.
104	Old sinks provided with new waste pipes.
34	Eaves gutters repaired.
67	Windows repaired.
65	Floors repaired.
71	Air inlets under floors provided.
32	Roofs repaired.
4	Rooms ventilated to the outer air.
20	Food cupboards ventilated to the outer air.
32	New food cupboards provided.
26	Houses provided with sufficient supply of water.
4	Samples of water submitted for analysis.
134	Rooms cleansed and limewashed.
16	Houses condemned and closed.
74	Dustbins provided or repaired.
78	Various improvements.
69	Hours' observation work.
160	Special inspections of back yards.
229	Chicken, ducks, etc., removed.
228	Inspections of stable yards and manure pits.
55	Offensive accumulations removed.
6	Stables paved and drained.
143	Inspections of slaughter houses.
104	Inspections of cowsheds, dairies, and milkshops.
65	Inspections of common lodging houses.
542	Inspections of food shops.
530	Parcels of food examined.
1750	lbs. food unfit for human consumption seized and destroyed.
657	Visits, interviews, etc., *re* work to be carried out.

Comparative Table of all Works carried out during the past Ten Years.

		1905	1906	1907	1908	1909	1910	1911	1912	1913	1914
Public Health and Tunbridge Wells Improvement Acts.	Complaints received and investigated	118	93	113	94	36	38	53	41	56	49
	Premises in respect of which statutory notices have been served	138	30	27	65	40	22	22	6	45	18
	Premises in respect of which informal notices have been served						21	6	48	32	127
	Houses, drains and sanitary fittings inspected	946	822	656	718	410	662	468	308	400	470
	Visits of re-inspection or to works in course of progress ...	2589	2053	2323	2053	1749	2089	1747	1640	1795	2193
	Drains re-constructed	61	64	89	48	50	56	45	50	29	44
	Drains repaired	45	34	32	43	41	45	39	31	37	33
	Choked drains cleared and cleansed	32	41	28	21	15	18	19	18	23	21
	Inspection chambers constructed	137	138	152	131	102	125	112	103	64	72
	Inspection chambers repaired	9	13	16	32	31	27	27	35	23	21
	Drain ventilation shafts erected or repaired	42	52	37	80	44	32	34	51	31	43
	Soil pipes erected	73	48	35	29	36	35	28	28	15	19
	Soil pipes repaired	...	...	6	25	25	26	24	15	14	12
	W.C.'s re-constructed and provided with flushing apparatus	195	143	129	126	120	131	147	100	66	79
	Flushing apparatus repaired	8	...	...	11	8	8	18	9	14	20
	Efficient traps substituted for inefficient ones	283	287	300	257	242	227	260	208	136	189
	Rain water and waste pipes disconnected from drains and made to discharge over properly trapped gullies ...	140	89	80	159	88	157	125	113	90	109
	Yards and areas paved or paving repaired	78	69	80	63	64	82	82	83	61	87
	New w.c. buildings and apparatus constructed	7	6	15	5	7	2	4	8	7	2
	W.C.'s ventilated to outside air	2	...	...	2	2	5	3	...	...	...
	W.C.'s cleansed and repaired	3	5	...	29	31	12	11	17	28	41
	Defective w.c. buildings condemned and demolished ...	4	...	...	6	...	...	3	2	...	...
	Urinals re-constructed	2	...	1	...	...	2	...	...	...	1
	New sinks provided	35	35	39	35	36	50	49	44	30	47
	New lavatory basins provided	...	...	...	29	19	18	16	19	14	14
	Old sinks provided with new waste pipes	45	63	73	119	83	99	112	104	64	104
	Urinals provided at licensed premises	1	2	1	3	1	...	...	1	3	1
	Eaves gutters repaired	5	2	21	53	22	41	46	42	48	34
	Windows repaired	...	9	13	86	51	14	31	63	49	67
	Floors repaired	4	4	12	41	35	16	29	53	61	65
	Air inlets under floors provided	10	6	7	9	8	11	38	39	20	71
	Roofs repaired	7	6	10	47	17	28	44	24	36	32
	Rooms ventilated to outer air	...	...	...	...	...	...	...	...	...	4
	Food cupboards ventilated to the outer air	...	...	...	...	...	...	...	...	...	20
	New food cupboards provided	...	...	...	...	...	...	...	...	...	32
	Defective cisterns abolished and water supply taken from rising main	38	12	2	11	1	4	11	...	1	...
	Houses provided with sufficient supply of water ...	137	71	69	86	65	85	91	56	47	26
	Samples of water submitted for analysis	32	26	9	3	6	2	6	1	10	4
	Rooms cleansed and limewashed	92	82	66	179	180	110	142	134	156	134
	Dustbins provided or repaired	69	23	17	81	45	32	32	27	39	74
	Wells and cesspools abolished	3	1	5	3	...	1	5	...	...	...
	Cases of overcrowding abated	...	...	...	...	...	...	...	4	1	3
	Offensive ditches cleansed	2	6	...	...	...	...	...	3	4	3
	Houses condemned and closed	...	1	...	...	...	...	33	17	44	16
	Various improvements	39	56	79	81	69	86	78	89	92	78
	Numbers of hours observation work	732	306	374	478	258	103	109	172	158	69
	Pigs removed	2	19	13	23	2	...	...	...	...	...
	Special inspections of back yards...	...	...	...	...	...	...	...	326	88	160
	Chicken, ducks, etc., removed	...	...	240	283	240	128	138	215	240	229
	Inspections of stable yards and manure pits	2466	3343	3119	3136	4221	3451	2316	1537	1519	228
	Offensive accumulations removed	496	684	745	848	844	650	652	143	153	55
	Stables paved and drained	5	1	6	5	3	3	1	9	6	6
	Inspections of slaughter houses	106	98	189	140	112	126	131	138	165	143
	Inspections of cowsheds, dairies and milkshops ...	49	129	130	128	161	164	152	180	161	104
	New cowsheds constructed	2	1	3	...	...	...	...	...	...	...
	Cowsheds paved and drained	...	1	...	...	1	...	...	1	...	...
	Inspections of common lodging houses	25	44	92	112	80	78	91	105	84	65
	Inspections of food shops	588	521	508	570	571	495	549	583	522	542
	Parcels of food examined	916	980	435	520	490	610	580	710	680	530
	Food unfit for human consumption seized and destroyed No. of lbs.	358	1216	1261	1418	93	861	54	472	2592	1750
	Samples of food submitted for bacteriological analysis ...	...	1	9	8	13	18	14	3	...	...
	Public Health (Milk and Cream) Regulations, 1912—Samples submitted for examination	...	...	...	...	...	...	...	...	10	8
	Visits, interviews, etc., *re* work to be carried out ...	...	684	1246	1373	1138	1068	1036	919	545	657
Factory and Workshops Acts.	Complaints received from Home Office	3	2	1	6	5	6	4	17	16	13
	Notices served	17	...	...	...	...	...	...	...	...	4
	Inspections of factories, workshops, bakehouses, etc. ...	1529	1448	1712	1840	991	1042	942	842	1044	658
	Workshops provided with sufficient and maintainable ventilation	27	3	1	...	11	3	5	...	1	1
	Workshop walls and ceilings cleansed and limewashed ...	42	9	48	65	53	61	49	58	46	38
	Workshop floors repaired	5	...	...	3	2	...	2	4	5	2
	Workshop roofs repaired	2	...	...	2	2	...	1	3	4	3
	Drains re-constructed or repaired	...	...	...	6	2	...	2	...	2	...
	New w.c.'s provided	2	...	1	2	7	1	2	2	1	...
	W.C.'s repaired	5	...	...	3	5	5	6	8	4	2
	Cases of overcrowding abated	7	...	...	1	2	3	...	...	...	3
	Yard pavings re-constructed or repaired	5	...	...	6	...	...	2	2	3	...
	Dustbins provided	2	...	...	3	...	...	...	...	1	...
	Drain inlets inside workshops abolished	2	...	...	1	5	...	1	1	2	...
	Efficient traps substituted for defective ones	...	...	...	21	5	...	10	6	8	1
	Workrooms measured up	19	14	18	19	6	9	9	20	7	10
	Visits to outworkers' premises	...	114	114	132	141	80	91	87	78	61
	Visits *re* Shop Hours and Seats Acts	...	...	74	209	125	121	114	129	101	88
Infectious Diseases Acts.	Visits to infected houses	501	274	249	228	314	353	370	379	211	313
	Rooms disinfected	195	337	455	355	575	606	702	740	236	424
	Articles of clothing disinfected	3460	7441	6888	7879	13965	12095	12464	10710	6285	10665
	Loads of bedding removed to the steam disinfector and returned to the respective owners	1	8	2	2	10	6	3	4	2	15
	Visits to flush w.c.'s and drains	620	138	41	51	...	28	38	51	46	31
	Public Buildings disinfected	...	6	12	12	23	11	5	6	9	15
	St. John ambulance and private carriages disinfected ...	...	10	6	8	8	6	5	8	14	27
	Wards at Sanatorium, General Hospital, etc., disinfected	...	4	5	20	13	15	5	10	4	4
	Loads of bedding destroyed	...	...	...	1	1	3	4	4	2	5
	Visits to Sanatorium to disinfect clothing, etc. ...	...	...	...	...	...	40	28	25	31	61
Food and Drug Acts.	Samples of food examined in Public Health Department	216	142	131	141	157	147	131	142	94	61
	Samples of food submitted to the Public Analyst ...	101	96	103	99	104	110	105	106	107	110

Works carried out under the Infectious Diseases Acts during 1914.

313	Visits to infected houses.
424	Rooms disinfected.
8665	Articles of clothing disinfected.
15	Loads of bedding removed to the steam disinfector and returned to their respective owners.
15	Visits to disinfect public buildings.
27	Visits to disinfect St. John Ambulance and private vehicles.
4	Visits to disinfect wards at Sanatorium, General Hospital, etc.
5	Loads of bedding destroyed.
61	Visits to Sanatorium to disinfect clothing, etc.
31	Visits to flush W.C.'s and drains.

SANITARY CERTIFICATES.—During the year the drainage and general sanitary condition of properties of an aggregate rateable value of £1,070 were surveyed and reported upon as a result of applications made for Sanitary Certificates which are issued to owners or occupiers applying for same, provided the drains and sanitary fittings are in accordance with the prescribed regulations and certain fees are paid. The time and labour involved is very considerable, but it is the cause of many improvements being made which are unattainable by law.

Showing Income derived from Sanitary Certificate Work during the past ten years.

Year.	Aggregate Rateable Value of Properties Surveyed.	Amount of Application Fees received.			Amount of Certificate Fees received.			Total amount received.			What the Income would have been if all the Certificates were taken up that it was possible to grant.		
	£	£	s.	d.	£	s.	d.	£	s.	d.	£	s.	d.
1905	3178	26	5	0	29	3	7	55	8	7	85	0	0
1906	2712	27	6	0	14	1	1	41	7	1	44	16	9
1907	3440	63	15	7	9	1	0	72	16	7	103	10	9
1908	3678	67	5	9	11	0	6	78	6	3	108	15	3
1909	3521	41	14	11	10	10	0	52	4	11	59	11	11
1910	1518	31	4	5	8	18	6	40	2	11	50	12	11
1911	1090	21	17	2	3	3	0	25	0	2	34	9	2
1912	2001	41	5	5	7	7	0	48	12	5	62	5	5
1913	1466	21	4	7	10	5	0	31	9	7	41	9	1
1914	1070	20	17	2	3	3	0	24	0	2	30	6	2
Totals	23674	362	16	0	106	12	8	469	8	8	620	17	5

Premises and Occupations which can be controlled by Bye-laws and Regulations.

Dairies and Cowsheds.—At the end of 1914 there were 77 persons on the register, namely, 16 owners of Cowsheds, 10 of dairies and 51 of milkshops or as purveyors; 104 inspections have been made in order to see that the bye-laws are complied with and we had no cause to complain of neglect in regard to limewashing, etc.

The character and wholesomeness of the milk produced within the district and that coming from farms beyond the district is generally satisfactory. The provisions of the Milk and Dairies Act, which will come into operation during this year (1915) were somewhat disappointing in one respect, viz., that the sale and storage of milk in general shops where such articles as paraffin, root vegetables, etc., are sold are not prohibited.

Slaughter Houses.—There are six private slaughter houses, namely, the five old registered ones and one which was built and licensed in 1907. Frequent inspections—143—have been made of the premises both by day and night in order to inspect as far as possible the carcases of animals slaughtered, to see that offal was promptly removed and cleansing and limewashing carried out according to the bye-laws. The five registered houses are old buildings and in three instances close to dwellings and for this reason are somewhat objectionable, but the owners must be given credit for having kept them in fair condition.

Common Lodging Houses.—There are five on the register (one exclusively for women and children) providing accommodation for 118 persons; 65 visits have been made to see that limewashing and cleansing were carried out. No case of notifiable infectious disease occurred in any house.

Schools.

The drainage of the Elementary Schools of the Borough discharges in sewers, with one exception, viz., Rusthall Boys' School, which discharges to cesspools. The water supply is, with one exception, taken from the main. In Basinghall School the water is obtained from a large cistern. One pipe should be constructed leading direct from the main, in order to provide a trustworthy supply of drinking water in this school. Further particulars as to some of the schools are furnished in the School Medical Report. (See page 63).

During the year a school clinic was established at which children whose health seems, for one reason or another, to be below par can be seen by the School Medical Officer, and given advice as to seeking medical treatment, etc. Attention is also given to the treatment of eye defects and defects of the teeth. In order to prevent the spread of infection, several school closures took place in the early part of the year, when measles and whooping cough were very prevalent in the Borough. Information on these matters is furnished in the School Report.

A large amount of bacteriological work has been done by the Health Department in connection with the school children, for instance, in the swabbing of contacts with Diphtheria cases, and visitation of schools by the Medical Officer of Health in the event of an outbreak of any infectious disease.

Administration in connection with the Public Health (Milk and Cream) Regulations, 1912.

Report for the year ended 31st December, 1914.

1. MILK ; and Cream not sold as Preserved Cream.

	(a) Number of samples examined for the presence of a preservative.	(b) Number in which a preservative was reported to be present.
Milk	63	nil
Cream	5	1

2. CREAM SOLD AS PRESERVED CREAM.

(*a*) Instances in which samples have been submitted for analysis to ascertain if the statements on the label as to preservatives were correct :—

(i.)	Correct statement made... ...	3
(ii.)	Statements incorrect	nil
		3

(*b*) Determinations made of milk fat in cream sold as preserved cream :—

(i.)	Above 35 per cent.	3
(ii.)	Below 35 per cent.	nil
	Total ...	3

(*c*) Instances where (apart from analysis) the requirements as to labelling or declaration of preserved cream in article 5 (1) and the proviso in Article 5 (2) of the Regulations have not been observed ... ... nil

(*d*) Particulars of each case in which the Regulations have not been complied with ... ... nil

3. THICKENING SUBSTANCES. Any evidence of their addition to cream or to preserved cream ... nil

4. OTHER OBSERVATIONS. All the cream samples were procured by a deputy informally and the amount of milk fat and preservatives found were as follows :—

No. of Sample.	Milk Fat.	Amount of Preservative.
1	53.5%	
2	41.8%	
3	47.3%	0.33%
4	54.2%	
5	47.3%	0.29%
6	61.2%	
7	54.2%	0.36%
8	52.7%	0.31%
Average	51.5%	

Samples Nos. 3, 5, and 7 were labelled as follows :—

PRESERVED CREAM
CONTAINING
BORIC ACID
NOT EXCEEDING
0.5 PER CENT.

Sample No. 8, which was not sold as preserved cream, contained 0.31% of Boric Acid preservative. The sample was taken informally, and a further sample procured formally was reported upon favourably early in 1915.

Observation will be kept on this source of supply.

Sale of Food and Drugs Act.

One hundred and ten samples of food were submitted to the Public Analyst, the result of analyses being shown in Table. All the samples were purchased informally and by deputies.

Thirty-nine of the sixty-three milk samples and three of the nineteen butter samples were procured in the public street.

Four of the milk samples were slightly adulterated, several further samples of each of these particular supplies obtained under the same circumstances gave a genuine result.

The average solids of the sixty-three milk samples (including the four adulterated) were as follows :—

Milk fat 3.8% Non-fatty solids 8.8%

Taking into consideration that series sampling with cover samples was extensively carried out, the results of the analyses (especially of milk and butter) may be regarded as satisfactory.

All the samples were submitted to the Public Analyst by the Chief Sanitary Inspector, who is the Officer specially appointed to carry out the provisions of the Acts.

Result of Analyses of Food Samples submitted to the Public Analyst during 1914.

Description of Samples.	No. of Samples.	Analyst's Report.	Proceedings.
Milk	63 { 59	Genuine	
	1	1 % added water	See note in text.
	1	2 % ,, ,,	
	1	3 % ,, ,,	
	1	3 % deficient in fat	
Butter	19	Genuine	Nil
Margarine ...	4	,,	,,
Lard	4	,,	,,
Cheese	6	,,	,,
Cocoa	5	,,	,,
Coffee	2	,,	,,
Table Salt ...	1	,,	,,
Tincture of Ammoniated Quinine	2	,,	,,
Tincture of Iodine	2	,,	,,
Gregory Powder	2	,,	,,

Food.

(*a*) MILK SUPPLY.—This has already been reported upon (page 25). No action was taken with respect to tuberculosis milk, no suspicious cases having been noted.

(*b*) OTHER FOODS.—During the year 783 lbs. of beef (including the tuberculous carcase of a cow), 50 lbs. of turkey, 39 lbs. of chicken, 57 lbs. of tripe, 672 lbs. of mackerel, 50 lbs. of prawns, and 4,710 lbs. of bananas were condemned as unfit for food and destroyed in the furnace at the baths. As no attempt had been made to sell the material for human consumption, no action was taken beyond confiscation and destruction.

Food Vendors (including the coster class) appear to realise more than hitherto, the advantage of submitting for examination food about which there is any question, before offering it for sale.

Samples of other foods to the number of 61 were examined at the Public Health Office. Of these 52 were obtained on Saturday nights and Sunday mornings.

Housing.

The number of dwelling houses inspected under and for the purposes of Section 17 of the Act, 1909, is 236.

The number of dwelling houses which on inspection were considered to be in a state so dangerous or injurious to health as to be unfit for human habitation is 16.

The number of representations made to the local authority with a view to the making of closing orders is 16.

There were no closing orders made.

The number of dwelling houses the defects in which were remedied without the making of closing orders is 191.

There were no dwelling houses which after the making of closing orders were put into a fit state for human habitation.

The 16 houses considered unfit for human habitation were voluntarily closed and at the time of writing had not been remedied.

The general character of the defects found to exist were as follows : defective floors, walls, ceilings, yard pavings and dustbins, absence of properly ventilated food stores and ventilation under floors.

The population is at the present time increasing, if at all, very slightly, and consequently the number of new houses in the course of erection is not great. Such houses as are being erected are for the most part at relatively high rents to meet the needs of persons who come from other districts to live in the Borough on account of its well-known reputation for health. The number of new houses for working people erected, or in the course of being erected during 1914 was 10.

HOUSES FOR THE WORKING CLASSES IN THE DISTRICT.—A number of visits were paid to working class houses with the express object of finding out how many houses were vacant and the reasons, as far as possible, for such houses being empty. This inspection showed that houses at the centre of the Borough, though perhaps considerably less attractive as dwellings, were occupied very speedily on being vacant, whereas those on the outskirts of the Borough remained empty for a long time. In certain districts, such as the neighbourhood of Silverdale Road, there is a tendency to one house being sub-let and occupied by two families, with the object of avoiding the necessity for paying a rent which for certain of the inhabitants was too large a drain on their small wages. There appears to be a slight deficiency in the number of houses at a low rental, from 4s. to 6s. per week, but as certain houses which could at a very small expense be put in good condition and let at such a rental, have been left empty for long periods, it is somewhat difficult to prove that such a deficiency exists at all. My own observations have satisfied me that there is a want of such houses, but that it does not exist to a wide extent; otherwise for rents of 6s. and upwards there is ample accommodation for the working classes, and the type of house is, in my experience, superior to similarly rented houses in most other districts. There is one area in the Borough, namely, Hervey Court and Hervey Town, in which the houses are crowded upon area to an extent which interferes with the free access of light and air. Early in the year, in conjunction with the Chief Sanitary Inspector, Mr. Cave, I went very thoroughly into the conditions pertaining to this area. A joint report was drawn up, setting out what appeared to be the best method of dealing with this congested area. These recommendations were not adopted in *toto*, and the area is being dealt with piece-meal. As this procedure is a very lengthy one, I would suggest that in the meantime in the interests of health the narrow paths which lead to Hervey Court should be paved, in order to minimise the danger of the spread of disease from dust infection during the hot summer months.

Factory and Workshops Acts.

The administration of the law in respect of Factories and Workshops is in the hands of two authorities, viz., H.M. Inspector of Factories and the Local Authority.

The following is a report of the work done by the Local Authority's Inspector.

A register is kept of all workshops situate within the district, recording the following information: date of occupation, name and address of occupier, situation of workshop, nature of work carried on and amount of moving power (if any), number and description of workers, cubic capacity, sanitary accommodation and means of escape from fire. To keep this register complete is a somewhat difficult matter by reason of the opening and closing of different premises, the changing of workers and alteration of proprietorship.

During the year 658 inspections have been made in order to secure observance of the provisions of the law in regard to cleanliness, ventilation, overcrowding, drainage of floors, sanitary accommodation and proper means of escape from fire; 55 defects were found and means taken to remedy same, two defects standing over in 1913 were also remedied. The majority of the workshops in the town are provided with a system of maintainable ventilation; the system recommended by us generally is the provision of a fresh air inlet on an outside wall so constructed as to prevent actual draught to the workers, and an outlet in the chimney or other suitable place.

As time permits the workshops are measured up and the air space ascertained and tickets stating the cubic capacity and the number of workers that may be employed therein, during day time and overtime, are fixed in each room; this is in addition to the prescribed abstract of the Act.

During the year H.M. Inspector reported particulars in respect of workshops which had been formally reported to him by the occupiers: 13 complaints were received from the Home Office referring to neglect as to limewashing, etc., which received attention.

No certificates for means of escape from fire have been given, there having been no new factory or workshop established employing over 40 persons. There are, however, workshops situated on the upper floors of some premises (where less than forty persons are employed) and some secondary means of escape appears to be necessary. This provision could be enforced by means of adopting the Local Government Board Model Bye-law which has been framed for the purpose.

The Home Office Orders require all persons connected with some 31 different trades to keep list of names and addresses of out-workers employed by them and to forward copies of same to the Sanitary Authority on or before the 1st February and the 1st August in each year. Every Authority must cause the lists to be examined and furnish the name and place of employment of any out-worker included in such list whose place of employment is outside their district, to the Council of the District in which the place of employment is.

The register of out-workers is always examined when a notification of infectious disease is received, in order if necessary to stop work being taken in by any person who may be in contact with infection.

There have been 28 lists of out-workers sent in during the year and 61 visits have been made in consequence.

A form for the return of " Out-workers " has been prescribed by the Secretary of State and may be obtained from His Majesty's printers at a nominal cost. In Tunbridge Wells these forms are supplied (in duplicate) free to any person applying for same, but even with this facility considerable difficulty is experienced in obtaining the lists from employers on the date required.

The Shop Hours and Seats for Shop Assistants Acts are practically bound up with the Factory and Workshops Acts and the Chief Sanitary Inspector is the Officer appointed to attend to the observance of same, and during the year 88 visits have been made *re* hours of employment and provision of seats. There has been no default found, neither has any complaint been made by any person concerned.

(Home Office No. I.)—INSPECTION.

INCLUDING INSPECTIONS MADE BY SANITARY INSPECTORS OR INSPECTORS OF NUISANCES.

PREMISES. (1)	Number of Inspections (2)	Number of Written Notices. (3)	Number of Prosecutions (4)
Factories ... ... (Including Factory Laundries.)	29	—	—
Workshops ... ... (Including Workshop Laundries.)	242	4	—
Workplaces ... ... (Other than Outworkers' premises included in Part 3 of this Report.)	387	—	—
Total	658	4	—

(55 Verbal Notices given and complied with.)

(Home Office No. 2.)—DEFECTS FOUND.

Particulars. (1)	Number of Defects. Found. (2)	Remedied. (3)	Referred to H.M. Inspector. (4)	Number of Prosecutions. (5)
Nuisances under the Public Health Acts :—*				
Want of Cleanliness	38	38	—	—
Want of Ventilation	1	1	—	—
Overcrowding	3	3	—	—
Other Nuisances...	11	11	—	—
† Sanitary accommodation — insufficient	—	—	—	—
† Sanitary accommodation — unsuitable or defective ...	2	4	—	—
† Sanitary accommodation — not separate for sexes ...	—	—	—	—
Total	55	57	—	—

* Including those specified in sections 2, 3, 7 and 8, of the Factory and Workshop Act as remediable under the Public Health Acts.

† For districts not in London state here whether section 22 of the Public Health Acts Amendment Act, 1890, has been adopted by the District Council, and if so what standard of sufficiency and suitability of sanitary accommodation for persons employed in factories and workshops has been enforced.

Section 22 of the Public Health Acts Amendment Act, 1890, has been adopted, and the standard of sufficiency and suitability enforced is as follows :—" That one W.C. be required for every 20 females, and subject to sufficient urinal accommodation being provided, one W.C. be required for every 25 males."

(Home Office No. 3.)—HOME WORK.

NATURE OF WORK*	OUTWORKERS' LISTS, SECTION 107.									OUTWORK IN UNWHOLESOME PREMISES, SECTION 108.			OUTWORK IN INFECTED PREMISES, SECTIONS 109, 110.		
	Lists received from Employers.							Prosecutions.							
	Sending Twice in the year.			Sending Once in the year.											
	Lists.†	Outworkers †		Lists.	Outworkers †										
(1)	(2)	Contractors (3)	Workmen. (4)	(5)	Contractors (6)	Workmen. (7)	Notices served on Occupiers as to keeping or sending lists. (8)	Failing to keep or permit inspection of lists. (9)	Failing to send lists. (10)	Instances. (11)	Notices served. (12)	Prosecutions. (13)	Instances. (14)	Orders made. (S. 110). (15)	Prosecutions. (Sections 109, 110). (16)
Wearing Apparel—Making, &c ...	28	2	109	1	—	1	16	—	—	—	—	—	—	—	—
No Outworkers' Lists received for any of the other 30 trades enumerated in the Home Office Table.															

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* If an occupier gives out work of more than one of the classes specified in column 1, and subdivides his list in such a way as to show the number of workers in each class of work, the list should be included among those in column 2 (or 5 as the case may be) against the principal class *only*, but the outworkers should be assigned in columns 3 and 4 (or 6 and 7) into their respective classes. A footnote should be added to show that this has been done.

† The figures required in columns 2, 3 and 4 are the *total* number of the lists received from those employers who comply strictly with the statutory duty of sending *two* lists each year and of the entries of names of outworkers in those lists. The entries in column 2 must necessarily be *even* numbers, as there will be two lists for each employer—in some previous returns odd numbers have been inserted. The figures in columns 3 and 4 will usually be (approximately) double of the number of individual outworkers whose names are given, since in the February and August lists of the same employer the same outworker's name will often be repeated.

(Home Office No. 4.)—REGISTERED WORKSHOPS.

Workshops on the Register (Sec. 131) at the end of the year. (1)		Number. (2)
Important classes of workshops, such as workshop bakehouses may be enumerated here.	Bakehouses	42
	Dressmakers and Milliners ...	72
	Tailors	33
	Laundries	45
	Various	121
Total Number of Workshops on Register		313

(Home Office No. 5.)—OTHER MATTERS.

Class. (1)		Number. (2)
Matters notified to H.M. Inspector of Factories :—		
Failure to affix Abstract of the Factory and Workshop Act (s. 133, 1901)		Nil.
Action taken in matters referred by H.M. Inspector as remediable under the Public Health Acts, but not under the Factory and Workshop Act (s. 5, 1901)	Notified by H.M. Inspector	,,
	Reports (of action taken) sent to H.M. Inspector ...	,,
Other		,,
Underground Bakehouses (s. 101) :—		
In use at the end of the year		8 in use. 3 unoccupied.

Note.—The Factory and Workshop Act, 1901 (s. 132) requires the Medical Officer of Health in his Annual Report to the District Council to report specifically on the administration of that Act in workshops and workplaces and to send a copy of his Annual Report, or so much of it as deals with this subject, to the Secretary of State (Home Office). If the Annual Report is presented otherwise than in print, it is unnecessary to include in the copy sent to the Home Office the portions which do not relate to factories, workshops, workplaces or homework. The duties of Local Authorities and the Medical Officer of Health under the Act of 1901 are detailed in the Home Office Memorandum of December, 1904. A further Memorandum on the Home Work Provisions of the Factory Act, was issued to all District Councils and Medical Officers of Health in October, 1906.

LIST OF WORKSHOPS, FACTORIES AND WORKPLACES, 1914.

WORKSHOPS.	No. on Register.	Persons employed.		
		Male.	Female.	Total.
Bakers	42	110	—	110
Basket Makers	2	6	—	6
Blacksmiths	14	65	—	65
Boot Makers	12	28	—	28
Builders and Carpenters ...	30	258	—	258
Cycle Manufacturers	9	21	—	21
Cabinet Makers	3	14	—	14
Carvers and Gilders	3	7	—	7
Carriage Builders	4	13	—	13
Confectioner	2	5	2	7
Dressmakers and Milliners ...	72	—	543	543
French Polisher	1	3	—	3
Gas and Hot Water Fitters ...	6	50	—	50
Knitting	2	—	3	3
Laundresses	45	3	172	175
Monumental Masons	3	9	—	9
Motor Engineers...	3	12	—	12
Picture Frame Makers ...	2	8	—	8
Saddlers and Harness Makers ...	4	12	—	12
Sign Writer	1	2	—	2
Scale Makers	2	4	—	4
Syphon Filler	1	1	—	1
Tailors	33	90	23	113
Telephone Fitter	1	4	—	4
Undertakers	3	11	—	11
Upholsterers	11	23	7	30
Umbrella Manufacturer ...	1	1	1	2
Watchmaker	1	4	—	4
	313	764	751	1515

FACTORIES.	No.	Persons employed.		
		Male.	Female.	Total.
Brewer	1	8	—	8
Builder	1	20	—	20
Cabinet Maker	1	6	—	6
Carpet Beating Works	1	3	—	3
Carriage Builder	1	25	—	25
Coffee Roaster	1	2	—	2
Cycle Manufacturer	2	10	—	10
Electrical Engineer	1	2	—	2
Engineer	3	7	—	7
Electric Light Works	2	22	—	22
Gas Works	1	40	—	40
Laundries	4	10	166	176
Mineral Water Factories	3	15	—	15
Photographers	2	27	21	48
Printers	11	154	16	170
Saw Mills	2	32	—	32
Stone Breaker	1	12	—	12
Tonbridge Ware Factory	1	7	3	10
Wood and Metal Letter Maker ...	1	3	2	5
	40	405	208	613
WORKPLACES.				
Including—				
Restaurant Kitchens, Livery Stable Yards, &c.	79	290	41	331
Totals	119	695	249	944

C.—SANITARY ADMINISTRATION OF THE DISTRICT.

There is a Chief Sanitary Inspector and three assistant Inspectors of Nuisances engaged in the Sanitary work. Two of the Sanitary Inspectors have each alloted to them one half of the Borough, in which they perform their duties and are supervised by the Chief Sanitary Inspector. The third Assistant Sanitary Inspector undertakes the duties of disinfection of premises to a very great extent, and also the work of disinfecting clothing as required at the Isolation Hospital disinfector.

Hospital Accommodation. The Borough has its own Fever Hospital, situated some 500 feet above sea level, in the Frant Forest neighbourhood, almost at the southern boundary. The site is an excellent one, airy and open with a southern exposure and wide view over valleys and woodland. There are 57 beds available for the treatment of infectious diseases, and these fully sufficed for all cases during the year. The administrative block is in need of enlargement, as it is, at present, unable to accommodate the staff of the Institution, but this matter is now in hand, sanction for a loan for this purpose having been obtained from the Local Government Board. As regards the staff, there is a general trained and fully qualified Matron, and one sister also general trained, in addition to a varying number of nurses. I myself am Medical Officer to the Institution. The vast majority of cases of infectious disease which occur in the district are removed to this Hospital, and only in a very few cases where circumstances permit, are they treated in their own homes. Many improvements have been made in the Isolation Hospital of late; for instance, during 1914 electric light was installed throughout the buildings, a very great improvement in keeping the air of infectious wards free from dirt or impurities. To assist the heating of the wards by fires, there has been installed a number of electric radiators of a good type for use in cold weather. These have now been given a trial and have proved themselves quite satisfactory. There is a considerable extent of ground, amounting altogether to seven acres.

Provision has been made for possible cases of small pox or plague at the Dislingbury Hospital, Capel, which has 20 beds. It is a joint Hospital under the administration of a Board representing Tunbridge Wells, Tonbridge and Southborough.

The Tunbridge Wells Improvement Act, 1890. Of this act, parts 2, 3, 4, 6, 7, and 12 have been adopted. These sections deal with Water Supply, Sanitary Provision of Buildings and Streets, Common Lodging Houses, Infectious Diseases, Slaughter Houses, and Public Baths. Of the Public Health Amendment Act, 1907, the following sections have been adopted : Sections 1—14, part 2, Sections 17, 21—24, 26—30, and 31—33. The Notification of Births Act was adopted at a meeting of the Borough Council on the 1st April, 1914. The adoption of this Act has enabled the Health Department to get into touch with Infant life in all cases in which it seems desirable, and to give advice on such matters as feeding and rearing of infants. Naturally following upon the adoption of this Act, an Infants' Consultation Centre has been established at the Health Office on Friday afternoons and the attendance of mothers with their babies at this Centre has been one of the most important branches of the Health Work. In addition to the attendance at the Office, babies are, in all cases where it is considered necessary, visited at their homes by the Health Visitors. The way in which the advice given has been carried out has been a gratifying feature of this new branch of the Health Department.

Chemical and Bacteriological Work. There is a well-equipped laboratory in the Health Office and the work of examining specimens for the presence of Diphtheria, Typhoid, Tubercle, Ringworm, etc., was undertaken by the Medical Officer of Health. In the course of the year 4,433 specimens were examined. The numbers of specimens of different nature examined were as follows :—

Laboratory Work, 1914.

		POSITIVE.	NEGATIVE.
Swabs (for Diphtheria)	4298	1143	3155
Blood (for Typhoid)	14	2	12
„ (for Para-Typhoid) ...	1	1	—
Sputa (for Tubercle)	86	6	80
Hairs (for Ringworm)	30	19	11
Urine	2		
Swab (for Streptococci)	1	—	1
Other Specimens	1		
	4433	1171	3259

I am indebted to the County Medical Officer of Health for reporting upon an additional 68 specimens which were sent to the Maidstone Laboratory during my absence on holiday. I have further to express my indebtedness to the County Medical Officer of Health for reporting in two cases on the presence or absence of virulence in the case of prolonged carrying of Diphtheria germs in the throat.

It will easily be recognised that this brief Table represents a large amount of work, the daily average of specimens examined during the year being 12. These large numbersof examinations were necessitated by the presence of Diphtheria, which though never on a very extensive scale, existed practically throughout the year in the Borough.

Chemical work has been confined to the examination of specimens of water and of sewage effluent and analyses of milk, etc. These examinations of specimens made by the Public Analyst are reviewed either under the Food and Drugs Act, or have already been referred to under the remarks upon water and sewage effluent.

D.—PREVALENCE AND CONTROL OF ACUTE INFECTIOUS DISEASES.

Of the notifiable acute infectious diseases, 237 cases occurred in 1914, as compared with 159 in 1913. Cases notified were as follows :—

*Ophthalmia Neonatorum	2
Diphtheria	154
Scarlet Fever	49
Enteric Fever	4
Puerperal Fever	4
Erysipelas	24
Total ...	237

* Notifiable for the first time in 1914.

The Zymotic Death Rate. That is, the number of deaths per thousand of the population due to the seven Zymotic diseases mentioned in the following Table: the rate was 0·9 as compared with 0·2 in 1913, 0·3 1912 and 1·0 in 1911.

Of the Diphtheria patients 95·5% were removed to the Isolation Hospital, and of the Scarlet Fever Patients 90% were removed.

MORTALITY FROM ZYMOTIC DISEASES FOR TEN YEARS.

	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914
Scarlet Fever	0	0	1	0	2	0	0	0	0	0
Enteric Fever ...	0	1	0	1	1	1	1	1	0	0
Erysipelas	0	0	1	0	0	0	0	0	1	0
Diphtheria and Membranous Croup ...	0	0	6	1	3	0	8	10	4	1
Diarrhœa & Dysentery	3	9	1	2	4	3	—	—	—	—
Diarrhœa & Enteritis	—	—	—	—	—	—	18	2	2	4
Small-pox	0	0	0	0	0	0	0	0	0	0
Measles	0	0	16	3	7	1	3	1	0	8
Whooping Cough ...	5	0	17	3	3	3	8	0	2	21
Total number of deaths from Zymotic Diseases	8	10	42	10	20	8	38	14	9	34
Percentage upon deaths from all causes ...	1·8	2·4	8·7	2·4	4·2	1·9	9·1	3·5	2·4	6·7
Zymotic Death-Rate per thousand living ...	0·2	0·2	1·1	0·3	0·5	0·2	1·0	0·3	0·2	0·9

Seasonal Incidence of Acute Infectious Diseases.

Month.	Scarlet Fever.	Diphtheria.	Enteric Fever.	Erysipelas	Opthalmia Neonatorum.	Puerperal Fever.
January	—	30	—	2	—	1
February	2	17	—	3	—	—
March	—	9	—	2	—	—
April	3	5	—	1	—	1
May	—	5	—	3	—	—
June	10	4	1	1	2	—
July	6	7	1	—	—	—
August	9	11	—	1	—	1
September	2	9	1	2	—	1
October	7	24	—	3	—	—
November	8	22	—	2	—	—
December	2	11	1	4	—	—
Total ...	49	154	4	24	2	4

It will be noticed in the above Tables that of the notifiable diseases, though a considerable number of cases occurred there was only one death, namely, a death from Diphtheria. On the other hand a very sharp epidemic of whooping cough and measles occurred in the early part of the year, and consequently the Zymotic death rate is comparatively high. In the first quarter of the year 25 deaths from these two diseases occurred—three-quarters of the total Zymotic death rate for the year.

Diarrhœa and Enteritis. The number of deaths due to these conditions was four. The summer was dry, but was not excessively hot and was therefore, on the whole, favourably to a low death rate from Diarrhœa.

Small Pox. There have been no cases in the Borough since the year 1903.

Erysipelas. This disease was somewhat prevalent throughout the year, 24 cases having occurred, but none of these proved fatal.

Scarlet Fever was during the early part of the year almost absent from the Borough, but in the month of June 10 cases occurred and a small number in each succeeding month, making a total of 49 cases. There were no deaths, and the type of the disease was in general mild.

Diphtheria. From a careful investigation of the present and past records of this disease in the Borough, it appears to be endemic in a mild form and mostly on a small scale with periodic increases, as is the case in many of the southern Boroughs. Since the commencement of bacteriological examination of all contacts, and of suspicious throats, probably there has been a larger number of actual cases discovered than before the institution of this method of diagnosis ; moreover the early discovery and prompt isolation of carriers or of incipient cases has no doubt contributed to a considerable extent to the prevention of the spread of infection. It is notable that during 1914 though the number of cases, 154, is the second largest on record since 1890, only one death occurred. The causes which contribute to this low mortality are in my opinion :—

(1.) The comparatively mild nature of the present type of Diphtheritic infection in this neighbourhood.

(2.) The arrangements made by the Corporation for the prompt examination of specimens taken from suspicious throats, and perhaps most of all the wise provision of anti-toxin for the immediate injection of suspicious cases ; it is to the early administration of anti-toxin more than to any other one thing that the reduced mortality is due.

(3.) The employment at the Isolation Hospital of fully trained and skilled Fever Nurses.

To quote from the Annual Report of the Principal Medical Officer to the Local Government Board for the year 1913-14, " The reduction in the death rate from Diphtheria and Croup, comparing the experience of the years 1891—1900 and the year 1913, is 55%, that is to say that the death rate in 1913 was less than half of the average death rate during the years 1891—1900." The following Table, giving the comparative incidence and mortality of Diphtheria for the years 1890—1914 in this Borough, is of great interest. It will be seen that though the number of cases has been fairly high during the years 1911—1914 as it was during the years 1896—1900, the comparison between the number of deaths in the two periods shows a remarkable diminution in the latter group of years. To make a direct comparison, the total number of cases during the years 1896—99 was 552, the total number of deaths being 62, representing a fatality of 10.7%; during the years 1911—14, there were 443 cases and 23 deaths, representing a death rate of 5.2%. It will be seen that this rate represents a reduction practically the same as that given in Dr. Newsholme's Report for the country during the year 1913 as compared with the years 1890—1900.

The chief problem in connection with Diphtheria is the germ carrier. Fuller legal powers in dealing with carrier cases are desirable. Though in the great majority of instances it is quite unnecessary to exercise any compulsion, isolated cases crop up in which powers to isolate carriers would prove most useful. Such a case occurred in the Borough of Tunbridge Wells in 1914.

On February 13th, a child was found to be suffering from Diphtheria and was removed to the Sanatorium. The throats of the mother and the four remaining children of the family were swabbed, and the mother was found to be carrying germs in large numbers. She refused to be isolated in the Sanatorium and refused to have the remaining children protected from Diphtheria by the injection of a prophylactic dose of anti-toxin. On March 5th, another child in the house took Diphtheria, and on March 6th, a third. The mother then consented to the protection of the remaining two children by the administration of anti-toxin. Anti-toxin was accordingly given at the time to one child, and the mother promised to bring the other child, who was out of doors, to the office in the morning. She did not do so and the child developed Diphtheria on March 10th. Meantime a neighbour's child had also developed Diphtheria on March 9th. This carrier was thus responsible for four fresh cases of Diphtheria. She then consented to enter the Isolation Hospital, where she was retained until finally infection disappeared. Although in many cases carriers do not appear to do any harm, this case is an illustration of the danger which may exist.

In the course of the year a considerable number of carriers were discovered and in 43 instances where the environment rendered it desirable they were removed to the Sanatorium and isolated and treated until free from infection.

Comparison of the Fatality, Incidence, and Mortality of Diphtheria in Different Years.

Year.	Estimated Population	No. of Cases.	Deaths Registered	Fatality per cent.	Attack-Rate per 1,000 Population	Death-Rate per 1,000 Population	Rainfall in inches.
1890	28,148	20	5	25·0	0·71	0·18	—
1891	27,984	16	4	25·0	0·57	0·14	—
1892	28,345	24	5	20·8	0·85	0·17	—
1893	28,705	41	9	21·9	1·40	0·31	26·05
1894	29,065	40	5	12·5	1·37	0·17	36·58
1895	29,535	44	8	18·2	1·49	0·27	26·69
1896	29,895	67	14	20·9	2·24	0·46	30·07
1897	30,255	117	10	8·5	3·86	0·33	27·65
1898	30,615	278	31	11·2	9·07	1·01	23·39
1899	30,975	120	7	5·8	3·87	0·23	28·10
1900	31,335	82	3	3·6	2·61	0·10	31·28
1901	33,443	31	1	3·2	0·92	0·03	24·84
1902	33,773	23	2	8·7	0·68	0·06	25·19
1903	34,073	9	0	0·0	0·26	0·00	42·41
1904	34,373	12	1	8·3	0·34	0·03	29·32
1905	34,673	17	0	0·0	0·49	0·00	27·05
1906	34,973	10	0	0·0	0·28	0·00	32·74
1907	35,273	27	6	22·2	0·76	0·17	28·55
1908	35,573	29	2	6·9	0·81	0·06	29·53
1909	35,873	11	3	27·3	0·31	0·08	35·14
1910	36,173	15	1	6·6	0·41	0·03	35·14
1911	35,778	69	8	11·6	1·92	0·22	35·19
1912	36,038	91	10	11·0	2·52	0·28	38·18
1913	36,298	129	4	3·1	3·5	0·11	...
1914	36,460	154	1	0·6	4·2	0·02	30·91

Whooping Cough. As already mentioned, this disease was extremely prevalent throughout the early part of the year, as was also measles. In consequence of this it was found necessary to close the Infant Departments of several schools in order to try to arrest the spread of infection. Particulars of these closures are given in the School Medical Officer's Report.

Quoting the deaths in England and Wales between the ages of 0 and 5 years during the year 1912, whooping cough accounts for 6.4% of the deaths. It is obvious that this disease and its complications, of which pneumonia is the most frequent and dangerous, has a fatality which is higher even than that of tuberculosis in all its forms in the age group 0 to 5 years. The fatality figure for tuberculosis for the same year is 5.6%.

Enteric Fever. This disease was not prevalent during the year. Only three cases of true Typhoid and one case of Para-typhoid Fever occurred. In three of the four cases the infection was known to have been acquired outside the Borough, in the fourth case it was impossible to trace the exact source of infection.

Puerperal Fever. Four cases of this disease occurred in the Borough during the year, none of which proved fatal.

Ophthalmia Neonatorum. By regulation of the Local Government Board this disease became notifiable for the first time in 1914 and it is hoped that this step will eventually succeed in preventing the numerous cases of blindness which result from inflammation of the eyes in the newly born child. It has been calculated by competent authorities that amongst children under the age of 14, at least half the cases of total blindness are caused by this particular disease.

Two cases were notified during the year, and in each case visits were paid to ascertain that satisfactory treatment was obtained and carried out. Both made good recoveries.

An interesting comparison may here be made between the sickness rate of the Borough, and that of County Boroughs and Urban Districts in general in England during the year 1914. Taking first of all Diphtheria, the sickness rate for Tunbridge Wells was 4.2 per thousand of the population whereas that for the Boroughs and Urban Districts was 1.66 per thousand. In the case of Scarlet Fever, the Tunbridge Wells sickness rate was 1.3 per thousand and that of the Boroughs and Urban Districts in general 4.12 per thousand. Enteric Fever attack rate of the Borough was 0.1 as compared with 0.25. The Diphtheria rate for Kent as a whole was 2.44. It will be seen that the attack rate for Diphtheria in Tunbridge Wells was high whilst that of Scarlet Fever and Enteric Fever was low.

Infectious Diseases. In all cases of infectious diseases the disinfection of rooms, bedding and clothing is carried out by the Officers of the Public Health Office. Specially constructed vans are used for the conveyance of bedding and clothing to and from the steam disinfector.

Notifications are sent to the various week-day and Sunday school Superintendents, informing them of infection in the cases of children attending the schools, and requesting them not to allow the attendance of scholars from the house for a stated period. Notices are also sent to public libraries so as to obviate infection by means of books returned from infected houses.

Notifications are again sent to schools and libraries when it is presumed the houses are free from infection.

A thorough inspection is made of all premises that may have been infected, and tests are applied to drains and sanitary fittings and steps are taken to remedy defects.

Other duties associated with the sources of milk supply and with out-workers in connection with factories and workshops receive due attention.

With regard to non-notifiable infectious diseases, such as measles, German measles, Chicken-pox, Whooping cough, and mumps, Head Teachers of schools have been asked, when they are informed of a case or suspected case of any of these diseases, to communicate with this Department immediately.

The school Nurses visit the house and exclude from school the actual sufferers from the disease, and such contacts as it is desirable to exclude.

The procedure with regard to these diseases is to exclude from the Infant Department all other children in the house, and from the Senior Departments such children as have not had the disease.

E.—PREVALENCE OF AND CONTROL OVER TUBERCULOSIS.

As will be seen from Table II. there were notified during the year 48 fresh cases of Pulmonary Tuberculosis and 28 cases of other forms of Tuberculosis. It is interesting to note that only five cases occurred amongst children under five years of age and two amongst persons of 65 years and upwards. As is usual, the vast majority of cases occurred during the ages at which the sufferers should be at the summit of their powers as active workers. The loss in wage earning capacity to the community is for the above reason much greater in the case of Tuberculosis than in that of other diseases.

The following Table gives the number of deaths from Phthisis and from other forms of Tuberculosis which have occurred annually since 1890, and the average death rate as expressed for periods of five years. It will be seen that there is a gradual and steady decline, which contrasting the first group of the years 1890-94 with the last group 1910-14, shows an actual decline from 1.77 per thousand of the population to 1.00 per thousand. These figures give great encouragement, and in view of the more energetic measures which have been recently adopted and which are only beginning to come into effect, there is every reason to hope that this reduced mortality will become still more apparent in the near future.

The arrangements for dealing with cases of tuberculosis are under the control of the Kent County Council. A Tuberculosis Dispensary has been established in the Borough to act as a centre to which Tuberculosis patients may be referred for examination by the Tuberculosis Officer, who then arranges as to the form of treatment they will receive, —if they be insured persons—under the Sanatorium Benefit Clause of the Insurance Act.

Deaths from Tuberculosis During the Last 25 Years.

Year.	Estimated Population	Phthisis.	Phthisis Death-rate	Other Forms of Tuberculosis.	Totals.	Tuberculosis Death-rate	Average Tuberculosis Death-rates
1890	28,148	37	1·32	12	49	1·38	1.77
1891	27,984	40	1·43	17	57	2·03	
1892	28,345	30	1·06	18	48	1·69	
1893	28,705	31	1·08	22	53	1·84	
1894	29,065	39	1·34	16	55	1·89	
1895	29,535	34	1·15	30	64	2·16	1.60
1896	29,895	25	0·83	21	46	1·54	
1897	30,255	25	0·82	11	36	1·19	
1898	30,615	21	0·68	20	41	1·35	
1899	30,975	40	1·29	15	55	1·77	
1900	31,335	20	0·63	24	44	0·85	1.24
1901	33,443	35	1·04	15	50	1·49	
1902	33,773	29	0·89	17	46	1·36	
1903	34,073	32	0·93	10	42	1·23	
1904	34,373	36	1·04	8	44	1·28	
1905	34,673	35	1·01	11	46	1·32	1.18
1906	34,973	28	0·80	8	36	1·03	
1907	35,273	35	0·99	8	43	1·22	
1908	35,573	20	0·56	14	34	0·93	
1909	35,873	43	1·19	7	50	1·39	
1910	36,173	28	0·77	11	39	1·08	1.00
1911	35,778	21	0·58	6	27	0·75	
1912	36,038	24	0·66	7	31	0·86	
1913	36,298	32	0·88	14	46	1·26	
1914	36,460	27	0·74	11	38	1·04	

Arrangements are being made by the County to undertake the treatment of all persons whether insured or non-insured so that the disease may be thoroughly dealt with. The functions of the Tuberculosis Dispensary are summed up in the Report of the Departmental Committee on Tuberculosis as follows :—

(*a*) A receiving house and centre of diagnosis.
(*b*) A clearing house and centre of observation.
(*c*) A centre for curative treatment.
(*d*) A centre for examination of all " contacts."
(*e*) A centre for " further care," and
(*f*) Information bureau and educational centre.

In continuance of the arrangements for treating all persons, the County Council has established both Sanatorium and Hospital beds in different parts of Kent. There is at the Tunbridge Wells Isolation Hospital a suitable area for the establishment of Hospital beds, and accordingly the County Council approached the Corporation with a view to establishing a number of beds there. The matter was very thoroughly considered, and I strongly recommended that the proposal should be adopted, but shortly before the time of writing the Borough Council negatived the scheme.

The procedure adopted by this Department on receipt of a primary notification is, in the first place to send a leaflet recommending precautions to prevent the spread of infection, and subsequently a member of the staff calls at the house to intimate that in the event of any change of address, immediately on notice being given, the room, which has been occupied by the patient, will be disinfected. Personal visits are paid by the Medical Officer of Health in the event of cases occurring in neighbourhoods in which it seems desirable to investigate the surroundings, and where circumstances seem to demand it, further visits are paid from time to time. In the event of death occurring, disinfection is undertaken, and further measures are recommended if necessary, *e.g.*, the stripping of the walls of the room, etc.

F.—INVESTIGATION OF OTHER DISEASES.

Of the 504 deaths occuring amongst the inhabitants of the District, 248, that is to say almost 50 %, occurred at the age of 65 years and upwards. During 1914, apart from investigation into the sources of Diphtheria cases, there was no occasion to make special investigation in any particular disease.

G.—MEANS TO PREVENT MORTALITY IN CHILDBIRTH AND INFANCY.

The County Authority administers the Midwives' Act in the Borough. The Notification of Births Act was adopted in the Borough on 1st April, 1914, and consequently this Department has been able to get into immediate touch with all infants when it appears to be desirable, as already mentioned on page 40.

The total number of visits paid to houses where infants had been born was 444, of these 278 were first visits, and 159 re-visits; 7 visits were paid to houses where infants had died.

On November 1st, the second Health Visitor, who had been appointed, commenced duty, and occasion was then made to extend the work under the Notification of Births Act, by the establishment of an Infant Consultation Centre. On November 13th, 1914, a commencement was made with this work—and from that date to the end of the year eight mothers with their infants attended at the Health Office, making 13 attendances. In the few weeks from the commencement of this scheme till the end of the year this Consultation Clinic made a creditable start and since then has become increasingly popular and useful. At the Clinic, advice is given to the parents on methods of feeding and general care of infants. In cases of illness which requires further medical attention, the mothers are advised to obtain such treatment, and the Health Visitors call at their homes in order to see that this advice is carried out. Particulars as to the Infant Mortality for the year are given in Table IV., page 61.

H.—VITAL STATISTICS OF THE DISTRICT.

The estimated population of the Borough in the middle of the year was 36,460. The area of the Borough is 3,991 acres, and the number of persons per acre is 9.1. From figures obtained at the census of 1911, the total population at all ages was 35,703. The number of inhabited houses was 7,671, the average number of persons per house being 4.6.

Births. The total number of births registered in the district was 496, by adding to this the births properly belonging to the Borough which occurred outside, and by substracting the births belonging to other districts which took place in the Borough, the corrected number obtained is 505.* This corresponds to a rate of 13.8 per thousand as compared with 15 per thousand in 1913, the lowest figure previously on record.

Deaths. 494 deaths were registered during 1914 in the Borough, 52 deaths of non-residents were transferred to the district to which they belonged, while 62 deaths of residents registered outside the Borough were transferred to Tunbridge Wells, thus making the total number of deaths belonging to the district 504*. Owing to the age and sex constitution of the population of Tunbridge Wells, the death rate 13.8 has to be corrected to 12 to make it correspond with the death rate at different ages in the country generally. The figure for correction as supplied by the Registrar General is 0.8683 of the recorded rate.

It will thus be seen that the births exceed the deaths by only one, from which it will be deduced that, discounting immigration and emigration, the population for the year was practically stationary.

It is notable that the number of boys born exceeds the number born in 1913, though the total number of births was very much less.

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* Figures of births and deaths for transference are supplied by the Registrar-General.

Population, Birth and Death Rates from 1904 to 1914.

Year.	Estimated Population.	Birth-rate per 1,000.	Death-rate per 1,000.	Infantile Mortality.	Zymotic Death-rate.
1904	34,373	18·6	12·5	98·2	0·8
1905	34,673	18·4	12·4	73·5	0·2
1906	34,973	19·3	11·8	82·8	0·2
1907	35,273	16·8	13·6	73·9	1·1
1908	35,573	17·3	11·7	81·4	0·3
1909	35,873	17·2	13·2	59·8	0·5
1910	36,173	16·3	11·3	75·8	0·2
1911	35,778	15·8	11·5	86·4	1·0
1912	36,038	15·8	11·0	43·8	0·3
1913	36,298	15·0	12·1	66·0	0·2
10 Years' Average		17·0	12·1	74·1	0·4
1914	36,460	13·8	13·8	79·2	0·9

Quarterly Death-Rate per thousand per annum for a period of Five Years.

	1910	1911	1912	1913	1914
1st Quarter ...	13·7	14·2	13·2	14·6	18·8
2nd Quarter ...	12·0	11·4	10·9	11·4	10·3
3rd Quarter ...	8·4	12·0	9·5	10·0	13·0
4th Quarter ...	10·9	8·6	10·3	12·2	13·0

Showing the Mortality at Several Ages for a period of Five Years.

	1910	1911	1912	1913	1914
Deaths at under 1 year	45	49	25	36	40
,, 1 and under 5	14	17	7	10	26
,, 5 and under 15	8	15	15	12	18
,, 15 and under 25	15	14	10	8	14
,, 25 and under 65	126	115	136	152	158
,, 65 and upwards	201	205	205	222	248
Totals ...	409	415	398	440	504

Showing the Number of Deaths at Ages beyond Sixty years.

Over 90 years of age	17
Under 90 and over 80	68
Under 80 and over 70	120
Under 70 and over 60	83
Total ...	288

(Deaths at all ages, 504).

In considering the death rate it will be noticed that during the first quarter of 1914, the mortality was very heavy. The total of the quarterly death rate per thousand per annum for the last five years is given above and it will be seen that the rate for the first quarter exceeded by more than four per thousand the highest rate that occurred during the preceding five years. More than half of these deaths were those of persons of the age of 65 and upwards, their vitality having been sapped by the raw and inclement cold of that period of the year. In addition, as has been previously mentioned the severe outbreak of whooping cough which occurred caused a somewhat high mortality.

Infant Mortality. Forty deaths of infants below one year of age occurred, giving a mortality of 79 per thousand births. Of the deaths of infants 20% were due to whooping cough. Premature birth and congenital malformations were responsible for 22.5% of the deaths. Atrophy, Debility, and Marasmus accounted for 15%.

The number of births during the 10 years 1905-14 was 5,923, the number during this year was 505. It will be seen that taking the average for the 10 years, the births should have numbered 592. The decline in the birth-rate has been steady and continuous for many years, and it is now so low that the natural increase of the population has vanished. It is earnestly to be hoped that this ebb-tide has reached its lowest level, and that the birth-rate in the Borough will ascend to the scale to which it formerly rose. The present war drives home to every nation the lesson that it has need of all its young life, and an increasing birth-rate is the best evidence of a vigorous and prospering community.

Causes of Infantile Mortality 1905—1914.

	1905	1906	1907	1908	1909	1910	1911	1912	1913	1914	Total Deaths, 10 years	Rate per 1000 Births.
Marasmus	11	7	9	6	5	7	2	3	11	6	67	11·2
Premature Birth ...	8	17	10	10	9	15	9	7	5	6	96	16·2
Bronchitis	...	4	1	5	1	4	6	...	1	2	24	4·0
Pneumonia	3	2	2	3	3	2	3	2	2	2	24	4·0
Convulsions	4	3	3	2	5	1	2	1	...	2	23	3·8
Congenital Defects ...	...	...	2	5	2	1	3	5	1	3	22	3·7
Diarrhœal Diseases ...	5	12	1	4	2	5	11	...	1	3	44	7·4
Whooping Cough ...	2	...	5	2	1	3	5	...	...	8	26	4·3
Overlaying	...	...	...	...	...	...	1	...	...	...	1	0·1
Measles	...	...	1	...	...	...	...	...	...	1	2	0·3
Non-Tubercular Meningitis	3	...	2	...	...	2	1	...	...	...	8	1·3
Tubercular Meningitis	1	2	...	...	...	1	...	1	1	...	6	1·0
Tubercular Peritonitis	1	...	...	1	...	...	...	...	...	...	2	0·3
Syphilis	...	1	1	1	...	...	...	...	2	1	6	1·0
Erysipelas	...	...	...	...	...	...	...	...	...	...	...	...
Other Causes	8	8	7	11	9	4	6	6	12	6	77	13·0
Total Deaths below 1 year ...	46	56	44	50	37	45	49	25	36	40	428	...
Rate per 1,000 Births...	71·9	82·8	73·9	81·4	59·8	75·8	86·4	43·8	66·0	79·2	72·2	...

The number of Births during the 10 years (1905—1914) was 5,923.

TABLE I.

Vital Statistics of Whole District during 1914 and Previous Years.

Year.	Population estimated to Middle of each Year.	Births.			Total Deaths Registered in the District.		Transferable Deaths. ‡		Nett Deaths belonging to the District.			
		Un-corrected Number.	Nett.				of Non-Residents registered in the District.	of Residents not registered in the District.	Under 1 Year of Age.		At all Ages	
			Number.	Rate	Number.	Rate.			Number.	Rate per 1,000 Nett Births.	Number.	Rate.
1	2	3	4	5	6	7	8	9	10	11	12	13
1909	35,873	618	...	17·2	469	13·0	43	50	37	59·8	476	13·2
1910	36,173	593	...	16·3	425	11·7	45	29	45	71·8	409	11·3
1911	35,778	577	567	15·8	424	11·8	60	51	49	86·4	415	11·5
1912	36,038	580	570	15·8	397	11·0	52	53	25	43·8	398	11·0
1913	36,298	557	545	15·0	415	11·4	44	69	36	66·0	440	12·1
1914	36,460	496	505	13·8	494	13·5	52	62	40	79·2	504	13·8

‡ "Transferable Deaths" are deaths of persons who, having a fixed or usual residence in England or Wales, die in a district other than that in which they resided. The deaths of persons without fixed or usual residence, *e.g.*, casuals, must not be included in Columns 8 or 9, except in certain instances under 3 (*b*) below. The Medical Officer of Health will state in Column 8 the number of transferable deaths of "non-residents" which are to be deducted, and will state in Column 9 the number of deaths of "residents" registered outside the district which are to be added in calculating the nett death-rate of his district.

The following special cases arise as to Transferable Deaths:—

(1) Persons dying in Institutions for the sick or infirm, such as hospitals, lunatic asylums, workhouses, and nursing homes (but not almshouses) must be regarded as residents of the district in which they had a fixed or usual residence at the time of admission. If the person dying in an Institution had no fixed residence at the time of admission, the death is not transferable. If the patient has been directly transferred from one such Institution to another, the death is transferable to the district of residence at the time of admission to the first Institution.

(2) The deaths of infants born and dying within a year of birth in an Institution to which the mother was admitted for her confinement should be referred to the district of fixed or usual residence of the parent.

(3) Deaths from Violence are to be referred (*a*) to the district of residence, under the general rule; (*b*) if this district is unknown, or the deceased had no fixed abode, to the district where the accident occurred, if known; (*c*) failing this, to the district where death occurred, if known; and (*d*) failing this to the district where the body was found.

Area of District in Acres (land and inland water) 3991; Total population at all ages, 35,703; Total families or separate occupiers, 8,146; At Census, 1911. [Figures given in Census special volume for the County, also in Vols. I., VI., and VIII. of the reports of the Census of England and Wales.]

TABLE II.

Cases of Infectious Disease notified during the Year 1914.

Notifiable Disease.	No of Cases Notified.								Total Cases Notified in each locality (*e.g.*, Parish or Ward) of the District.				Total Cases removed to Hospital.
	At all Ages.	At Ages—Years.											
		Under 1.	1 to 5.	5 to 15.	15 to 25.	25 to 45.	45 to 65.	65 and upwards	North Ward.	South Ward.	East Ward.	West Ward.	
Small-pox	...	...	...	...	...	...	...	...	...	...	...	...	...
Cholera (C) Plague (P)	...	...	...	...	...	...	...	...	...	...	...	...	...
Diphtheria, including Membranous Croup	154	1	23	101	19	10	...	...	45	33	31	45	147
Erysipelas	24	...	...	...	2	8	13	1	9	6	5	4	1
Scarlet Fever	49	...	7	36	5	1	...	...	19	12	9	9	44
Typhus Fever	...	...	...	...	...	...	...	...	...	...	...	...	...
Enteric Fever	4	...	...	1	1	2	...	...	1	...	2	1	1
Relapsing Fever (R) Continued Fever (C)	...	...	...	...	...	...	...	...	...	...	...	...	...
Puerperal Fever	4	...	...	...	2	2	...	...	...	...	3	1	1
Cerebro-spinal Meningitis	...	...	...	...	...	...	...	...	...	...	...	...	...
Poliomyelitis	...	...	...	...	...	...	...	...	...	...	...	...	...
Ophthalmia Neonatorum	2	2	...	...	...	...	...	...	...	1	...	1	...
Pulmonary Tuberculosis	48	...	...	5	8	28	6	1	12	8	11	17	11
Other forms of Tuberculosis	28	1	4	9	5	6	2	1	6	10	3	9	6
Totals	313	4	34	152	42	57	21	3	92	70	64	87	211

The Accommodation provided for the treatment of Infectious Diseases is as follows :—

THE SANATORIUM (The Tunbridge Wells Isolation Hospital) situate in Tunbridge Wells...	Scarlet Fever ... Diphtheria ...	40 Beds. 17 Beds.
THE GENERAL HOSPITAL, situate in Tunbridge Wells (the Authorities are under an Agreement at a contract price to treat cases of Enteric Fever		All Beds required.
THE DISLINGBURY HOSPITAL for Small-pox and Plague, situate at Capel in the Tonbridge Rural District, belonging to the Joint Hospital Board of the Tunbridge Wells Corporation, the Tonbridge Urban District Council, the Southborough Urban District Council, and the Tonbridge Rural District Council		20 Beds.

TABLE III.

Causes of, and Ages at Death during the Year 1914.

CAUSES OF DEATH.	Nett Deaths at the subjoined Ages of "Residents" whether occurring within or without the District. (*a*)									Total Deaths whether of residents or non-residents in Institutions in the District (*b*).
	All Ages.	Und'r 1 year	1 and under 2 years	2 and under 5 years	5 and under 15 years	15 and under 25 years	25 and under 45 years	45 and under 65 years	65 and upwards	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
All Causes { Certified (*c*)	497	40	13	13	18	14	55	100	244	...
All Causes { Uncertified	7	...	...	...	...	...	...	3	4	...
Enteric Fever	...	...	...	...	...	...	...	...	...	1
Small Pox	...	...	...	...	...	...	...	...	...	...
Measles	8	1	4	1	2	...	...	...	...	1
Scarlet Fever	...	...	...	...	...	...	...	...	...	...
Whooping Cough	21	8	4	7	2	...	...	...	...	...
Diphtheria and Croup	1	...	...	1	...	...	...	...	...	1
Influenza	19	1	...	...	1	...	...	4	13	...
Erysipelas	...	...	...	...	...	...	...	...	...	1
Phthisis (Pulmonary Tuberculosis)	27	...	...	...	1	7	15	4	...	1
Tuberculous Meningitis	4	...	1	1	2	...	...	...	...	1
Other Tuberculous Diseases	7	1	...	...	1	...	1	2	2	2
Cancer, Malignant Disease	53	...	...	...	...	...	7	13	33	12
Rheumatic Fever...	1	...	...	...	1	...	...	...	...	...
Meningitis (*See* note (*d*))	4	...	...	...	2	1	1	...	...	5
Organic Heart Disease	66	...	...	...	...	1	5	32	28	2
Bronchitis	26	2	...	2	...	...	1	5	16	...
Pneumonia (all forms)	24	2	2	...	...	...	6	1	13	6
Other Diseases of Respiratory Organs ...	4	...	...	...	...	...	...	1	3	...
Diarrhœa and Enteritis (*See* note (*e*)) ...	4	3	...	...	...	...	...	...	1	1
Appendicitis and Typhlitis	7	...	...	...	2	...	2	3	...	8
Cirrhosis of Liver	5	...	...	...	1	...	...	4	...	...
Alcoholism	1	...	...	...	...	...	1	...	...	...
Nephritis and Bright's Disease	16	...	...	...	...	...	3	4	9	1
Puerperal Fever	...	...	...	...	...	...	...	...	...	...
Other Accidents and Diseases of Pregnancy and Parturition	1	...	...	...	...	...	1	...	...	1
Congenital Debility and Malformation, including Premature Birth	16	15	1	...	...	...	...	...	...	4
Violent Deaths, excluding Suicide	8	1	...	...	1	...	1	4	1	7
Suicide	4	...	...	...	...	...	1	2	1	...
Other defined Diseases	171	6	...	1	2	5	9	21	127	17
Diseases ill-defined or unknown	6	...	1	...	...	...	1	3	1	1
Totals ...	504	40	13	13	18	14	55	103	248	73
SUB-ENTRIES, included in above figures— Pneumonia	16	...	4	...	...	...	6	...	6	

NOTES TO TABLE III.

(*a*) All "Transferable Deaths" of residents, *i.e.*, of persons resident in the District who have died outside it, are to be *included* with the other deaths in columns 2-10. Transferable deaths of non-residents, *i.e.*, of persons resident elsewhere in England and Wales who have died in the District, are in like manner to be *excluded* from these columns. For the precise meaning of the term "transferable deaths" *see* footnote to Table I.

The total deaths in column 2 of Table III. should equal the figures for the year in column 12 of Table I.

(*b*) All deaths occurring in institutions for the sick and infirm situated within the district, whether of residents or of non-residents, are to be entered in the last column of Table III.

(*c*) All deaths certified by registered Medical Practitioners and all Inquest cases are to be classed as "Certified;" all other deaths are to be regarded as "Uncertified."

(*d*) Exclusive of "Tuberculous Meningitis" (10), but inclusive of Cerebro-spinal Meningitis.

(*e*) Title 19 should be used for deaths from Diarrhœa and Enteritis at all ages. (In the "Short Lists" deaths from Diarrhœa and Enteritis under 2 years are included under Title 19; those at 2 years and over being placed under Title 28).

TABLE IV.

INFANT MORTALITY.

1914. Nett Deaths from stated causes at various Ages under 1 Year of Age.

See Note (*a*).

CAUSE OF DEATH.	Under 1 Week.	1-2 Weeks	2-3 Weeks	3-4 Weeks	Total under 1 Month	1-3 Months	3-6 Months	6-9 Months	9-12 Months	Total Deaths under 1 Year.
All causes Certified ...	—	—	—	—	—	—	—	—	—	—
All causes Uncertified	—	—	—	—	—	—	—	—	—	—
Small-pox	—	—	—	—	—	—	—	—	—	—
Chicken-pox	—	—	—	—	—	—	—	—	—	—
Measles	—	—	—	—	—	—	—	—	1	1
Scarlet Fever	—	—	—	—	—	—	—	—	—	—
Whooping-cough ...	—	—	1	—	1	2	—	2	3	8
Diphtheria and Croup ...	—	—	—	—	—	—	—	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—
Tuberculous Meningitis	—	—	—	—	—	—	—	—	—	—
Abdominal Tuberculosis (*b*)	—	—	—	—	—	—	—	—	—	—
Other Tuberculous Diseases	—	—	—	—	—	—	—	1	—	1
Meningitis (not Tuberculous)	—	—	—	—	—	—	—	—	—	—
Convulsions	—	1	—	—	1	—	—	1	—	2
Laryngitis	—	—	—	—	—	—	—	—	—	—
Bronchitis	—	—	—	—	—	—	2	—	—	2
Pneumonia (all forms) ...	—	—	—	—	—	—	—	2	—	2
Diarrhœa	—	—	—	—	—	—	1	—	1	2
Enteritis	—	—	—	—	—	—	1	—	—	1
Gastritis	—	—	—	—	—	—	—	—	1	1
Syphilis	—	1	—	—	1	—	—	—	—	1
Rickets	—	—	—	—	—	—	—	—	—	—
Suffocation (overlying)	—	—	—	—	—	—	—	—	—	—
Injury at Birth ...	—	—	—	—	—	—	—	—	—	—
Atelectasis	—	—	—	—	—	—	—	—	—	—
Congenital Malformations (*c*)	3	—	—	—	3	—	—	—	—	3
Premature Birth ...	4	—	1	—	5	1	—	—	—	6
Atrophy, Debility and Marasmus	1	—	1	1	3	3	—	—	—	6
Other causes	1	1	—	—	2	—	1	1	—	4
Totals ...	9	3	3	1	16	6	5	7	6	40

NETT BIRTHS IN THE YEAR—		NETT DEATHS IN THE YEAR OF—	
Legitimate	477	Legitimate Infants ...	32
Illegitimate	19	Illegitimate Infants ...	8

NOTES TO TABLE IV.

(*a*) The total in the last column of Table IV should equal the total in column 10 of Table I., and in column 3 of Table III.

(*b*) Under Abdominal Tuberculosis are to be included deaths from Tuberculous Peritonitis and Enteritis and from Tabes Mesenterica.

(*c*) The total deaths from Congenital Malformations. Premature Birth, Atrophy, Debility and Marasmus, should equal the total in Table III. for ages under 1 year, under the heading Congenital Debility, and Malformation including Premature Birth.
Want of Breast Milk should be included under Atrophy and Debility.

(*d*) For references to the meaning of any other headings *see* notes attached to Table III.
In recording the facts under the various headings of Tables I., II., III. and IV., attention has been given to the notes on the Tables.

Report to the Education Committee

BY

Dr. F. C. LINTON,

School Medical Officer and

Medical Officer of Health.

9, Calverley Parade.

Ladies and Gentlemen,

I have the honour to present the following report for the year 1914 upon the work carried out by the staff of the Public Health Department in connection with the Public Elementary Schools in the Borough.

This, my first annual report, is the seventh submitted to the Committee, and its scope and arrangement are in accordance with the suggestions in circular 596 of the Board of Education.

On December 31st, 1914, there were within the area of the Borough no provided schools and there were 19 non-provided schools, including 27 departments with recognised accommodation for 5,225 children, as in 1913. The average number of children on the admission registers during 1913-14 was 4,673, as compared with 4,767 during 1912-13.

EQUIPMENT OF SCHOOL BUILDINGS.

A number of dual desks of a good type were supplied in some of the schools, the particulars being as follows :—

St. James' Boys' School ...	25 dual desks.
St. John's Boys' School ...	20 dual desks.
St. Barnabas' Boys' School ...	18 dual desks.
St. Barnabas' Girls' School ...	18 dual desks.
Rusthall Boys' School ...	20 dual desks.
St. Peter's Girls' School ...	4 dual desks.
Grosvenor School	34 dual desks.

While considering the subject of the provision of fresh fittings or furnishings for school buildings, I take the opportunity of mentioning the following general principles for guidance in the hygienic furnishing of schools.

(1.) A floor sufficiently impervious to allow of the thorough cleansing of its surface.

(2.) A choice of a type of desk that offers the least obstacle to the sweeping and cleansing of the floors. At least 10 per cent. of single adjustable desks should be provided, as the percentage referred to corresponds with the number of children likely to require special consideration in the arrangement of seats.

(3.) The provision of suitable fixed cupboards in place of movable furniture, behind which the dust lodges.

(4.) Sanitary conveniences suitably separated from the school buildings, and under the direct supervision of the Head Teacher.

CLOAKROOM ACCOMMODATION.

This is a subject to which too small an amount of attention has been devoted in the building of schools in the past.

The following principles should be observed in the provisions of cloakrooms :—

(1.) Good cross ventilation is essential, and wherever possible inter-position of a passage between the cloakroom and any class rooms in use.

(2.) The provision of fixed cloak stands of such a height that cloaks hanging on the top row of pegs clear those hanging on the lower row of pegs, also a stout wire frame should be fixed between the pegs to prevent cloaks, hanging on opposite sides, from being in actual contact with each other. In practice this means that the frame work for Infants' Schools should be 5ft. 6ins. in height, the lower row of pegs being fixed to a bar 3 ft. above the ground. In Senior Schools a stand of 6ft. 6in. is required. An assistant teacher or senior scholar should in every case superintend the hanging up of cloaks on the arrival of the children, and their removal on departure. A frame of stout metal tubing is better than a heavy wooden frame work.

(3.) Some heating arrangement for drying cloaks and boots on wet days should be provided. In cases where conveniences for heating do not exist, a few additional movable cloak stands should be provided, in order that the cloaks may be removed to some drying place, elsewhere than in the cloakroom, if necessary.

(4.) The flooring should be of impervious material and sloped to an exit channel in one corner, discharging over an external gulley; into this channel lavatory basins should discharge. Lavatory basins are usually most conveniently placed in the Cloakrooms.

SANITARY CONVENIENCES.

The sanitary conveniences in the schools are inspected from time to time by members of the Sanitary Staff.

It is one of the Medical Officer's duties to report upon the general hygienic construction and environment of the schools in his area, and I have accordingly made a detailed examination of the buildings of three of the schools and append the following report upon these buildings which were selected for an early inspection because of their situation in crowded areas or cramped positions, which render it of special moment that every consideration be given to their hygienic condition.

Varney Street School.

The playground is of a fair size, but the asphalted surface is much broken up and is in need of repair.

In the Cooking Room the lighting and heating arrangements are good and the ventilation is satisfactory. One exposed wall is suffering much from damp, and any food placed in the cupboards which are against this wall, also suffers from the damp. An inspection of the premises showed that this dampness can be remedied by repairing the roof guttering which is defective opposite the damp place ; and by treating this wall with a coating of tar the future entrance of damp can be prevented. The floor, which is of wood planks, should be rendered impervious, as in its present condition, it is not suitable for laundry work or for cooking.

Outside the sink waste pipe discharges into a gulley, which needs dishing, that is to say, the surrounding brick edging needs to be raised, as at present the waste water soaks over a portion of the playground in the neighbourhood of this gulley. A similar dishing is necessary at the gulley outside the school wash-hand basins waste pipe.

The sanitary conveniences are of an antiquated type and a more modern arrangement should be substituted. Flushing to all water closets has to be worked by hand, a most unsatisfactory arrangement.

The Cloakrooms are small and crowded, and the cloaks are hanging on the walls in the entrance lobbies, and super-imposed upon each other, thus retaining dampness and tending to the spread of infection, if any be present. There is a dearth of air-inlets for sub-floor ventilation.

In the large school room there is good cross ventilation, and the two stoves give sufficient warmth, and artificial lighting is by electricity. The children sit facing the windows ; a roof sky light would improve the room lighting. In the small school room, there is good lighting from the left side. There is an open fireplace, and the back of one of the large stoves in the main room helps to heat this room. This room ventilates into the larger room, and also by its windows to the external air.

The yard paving is in poor condition.

Basinghall School.

The sanitary conveniences are modern and of an excellent type, scraping and tarring of the walls of the urinal are, however, urgently needed ; also a good supply of water should be kept running from the automatic flush tank during school hours : this tank was not in action at all on the occasion of two visits paid during school hours.

The cloakroom is cross-ventilated, and the main schoolroom has good cross-ventilation high up, and is well heated by two slow-combustion Tortoise stoves. The baby room, though cross-ventilated, was stuffy when inspected, owing to the considerable number of occupants. The lighting, which should be specially good in the baby room, is inadequate. The third room is well ventilated, well lighted and well heated.

The playground is cramped, and the position of the school in the midst of higher buildings is not one that would be approved in selecting a school site in the present day.

Grosvenor School.

The space in general here is cramped and the sanitary conveniences are unsatisfactory, being too near the occupied rooms, in fact dampness is present in the wall and floor boarding in one room, in a position opposite the urinal flush. The cloakrooms are small and the rows accordingly are too close and overlap. The repaving of some portions of the school yard is necessary.

The lighting here is a difficult matter: the children sit facing the light, an unsuitable arrangement. A sky light of corrugated sheet glass of "Pludelux" type would dispel the gloom, and greatly improve the lighting of the rooms, and would bring the strongest light from a good direction.

The lighting, heating and ventilation of the side rooms is satisfactory.

ORGANISATION AND CO-ORDINATION OF SCHOOL AND OTHER PUBLIC HEALTH WORK.

The Medical Officer of Health is also the School Medical Officer, and in this way complete co-ordination exists.

ASSISTANCE TO THE SCHOOL MEDICAL OFFICER.

During 1914 considerable changes have occurred in the School Medical staff. Apart from my own arrival in December 1913, Nurse Whyte succeeded Nurse Clarke as School Nurse and Health Visitor early in 1914, and in November, 1914, Nurse Brocklehurst was appointed to a similar post in order to cope with the rapidly increasing work of the Department, which now includes the treatment of minor ailments, as will be more fully dealt with later in the description of the School Clinic. Early in the year a clerk, of whose time a large and growing proportion is devoted to school work, was appointed to the Health Department. Being mobilised on the outbreak of war, his position has been efficiently filled by a lady clerk. In addition, in connection with the School Clinic the following appointments have been made: Dr. David Davies, M.B., M.R.C.S., Ophthalmic Surgeon, Mr. J. Price Evans, L.D.S., School Dentist, and Dr. C. Elliott, M.R.C.S., L.C.R.P. (Lond.), Anæsthetist.

In April, 1914, a more convenient method of keeping the Medical Inspection records, that of the Card Index System, was substituted for that of keeping Medical Inspection Registers, from which records had afterwards to be copied in the case of the transference of children from school to school, either within the Borough or without the district, a matter of frequent occurrence.

I desire here to take the opportunity of expressing my thanks to the above mentioned members of the staff for the unfailing and cordial assistance which they have given me in the establishment of the work on a satisfactory basis, and in the case of the school Nurses for their readiness and zeal in carrying out the numerous duties which they have discharged.

EXTENT AND SCOPE OF MEDICAL INSPECTION.

Medical Inspection was largely confined to entrants, and to children from the age of 12 years and upwards, instead of as formerly, from the age of 13 years upwards.

The older children were examined in the early part of the year, that as many as possible might be examined before their departure from school. The infants were accordingly examined in the latter half of the year. The following Table E. I. shows the extent of the work done.

TABLE E. I.

Total Number of Inspections for 1914.

Age	Entrants.						Leavers.					Grand Total.
	3	4	5	6	Other Ages.	Total.	12	13	14	Other Ages.	Total.	
Boys ...	7	121	89	26	25	268	133	136	28	—	297	565
Girls ...	7	74	72	42	27	222	131	117	25	1	274	496
Totals ...	14	195	161	68	52	490	264	253	53	1	571	1061

ATTENDANCE OF PARENTS OR GUARDIANS.

The attendance of parents or guardians is invited at the Medical Inspection of children ; notices being sent out by the Head Teacher. The parent or guardian of children inspected was present in 689 instances out of a total number of 1,061, or 65 per cent. This proportion is a gratifying indication of the interest taken in the Medical Inspection, and is a valuable factor in obtaining successful results from the Inspection. In the Infants' Section 376 parents attended at the Inspections, out of a total number of 474, or 79·3 per cent. In the Girls' School 64 per cent. and in the Boys' School 43·5 per cent. of parents attended. In the case of the boys the personal element was partly responsible for the smaller percentage, as the older boys do not like to have their mothers present when being inspected. The presence of parents is welcomed at all ages, but is perhaps of the highest value in the case of infants who are least able to give information about themselves, when light is wanted on the possible causes of any faulty condition discovered. Parents also attend in very considerable numbers at the School Clinic at the Health Offices, when special inspections of their children are being made.

TABLE E. II.

Age.	Number Examined.	Parents or Guardians present.	Total Number in whom Defects were found.	WANT OF CLEANLINESS.					CLOTHING.			NATURE OF DEFECTS.																						If Employed.	Written and Verbal Directions to Parents.		Printed Directions.
				HEADS.			BODY.					VISION.		External Eye Disease.	Malnutrition.	TEETH.		Tonsils.		Glands.		Adenoids present.	EAR TROUBLE.		Mentally Defective.	Mentally Sub-normal.	Heart Affections.	LUNG TROUBLE.		DEFORMITY AND SPINAL DISEASES.		Communicable Diseases.	Sundry Defects.		General Hygienic Advice.	Medical or Surgical Treatment.	
				Ver.	Nits only.	Dirty.	Ver.	Dirty.	Defective.	Dirty	Defective Footgear.	6/9.	6/12 and worse.			One to four decayed.	More than four decayed.	+	++	Palpable	+		Ear Disease.	Deafness.				Phthisis.	Other Lung Diseases.	Spinal Curvature.	Other Deformities.						
BOYS' SCHOOLS.																																					
10—11	2	2	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1
11—12	6	4	4	—	—	—	—	—	—	—	—	—	—	—	1	2	1	15	1	2	1	—	1	—	—	—	—	—	—	—	—	—	2	2	3	1	1
12—13	133	68	117	—	3	—	2	—	4	—	5	5	7	6	12	97	16	13	3	12	2	3	7	7	—	—	7	—	3	—	4	—	24	36	55	36	37
13—14	136	53	117	1	4	—	—	—	2	—	1	9	2	1	15	80	21	1	3	7	—	5	5	6	—	2	7	—	—	—	10	—	9	63	51	46	45
14—15	28	6	19	—	2	—	1	—	1	—	1	—	1	—	2	15	3	1	1	1	—	1	2	1	—	—	3	—	—	—	2	—	1	5	5	6	7
	305	133	258	1	9	—	3	—	7	—	7	14	10	7	30	194	41	31	8	22	3	9	15	14		2	17	—	3	—	16	—	37	106	115	89	91
GIRLS' SCHOOLS.																																					
10—11	3	2	3	—	—	—	—	—	—	—	—	—	—	—	—	2	—	—	—	—	—	1	1	—	—	—	1	—	—	—	—	—	2	—	1	2	1
11—12	5	4	4	—	2	—	—	—	1	—	1	1	1	—	1	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2	—	1	3	1
12—13	131	84	118	1	29	—	—	—	3	—	3	8	6	3	7	82	13	13	3	7	2	1	3	2	—	—	7	—	2	—	3	2	18	—	42	34	48
13—14	117	73	106	3	24	—	—	—	3	1	7	14	6	8	18	67	13	15	6	6	2	2	10	10	—	—	4	—	4	1	5	—	13	—	42	32	53
14—15	25	16	21	—	5	—	—	—	—	—	—	1	2	—	4	17	1	1	2	3	—	1	—	—	—	—	3	—	—	—	1	—	5	—	10	7	11
15—16	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	—
	282	180	253	4	60	—	—	—	7	1	11	24	15	11	30	173	27	29	11	16	4	5	14	12	—	—	16	—	6	1	9	2	40	—	97	78	114
INFANTS' (BOYS') SCHOOLS.																																					
3—4	7	5	6	—	1	—	—	1	1	—	3	—	—	—	2	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	3	2	1
4—5	121	102	102	—	8	3	—	1	9	—	14	—	—	1	11	39	40	25	2	15	2	7	6	1	—	—	13	—	6	—	2	—	14	—	59	33	16
5—6	89	65	77	—	4	—	—	1	3	—	5	—	—	—	7	35	32	8	—	6	1	4	—	3	—	—	4	—	5	1	1	—	14	—	41	22	13
6—7	26	22	26	—	2	—	—	—	1	—	2	—	—	1	2	15	7	4	—	2	—	4	2	1	—	—	3	—	2	—	—	—	6	—	17	8	4
7—8	15	14	15	—	—	—	—	—	—	—	—	—	—	—	2	8	4	1	—	2	—	1	—	1	—	—	—	—	—	—	—	—	2	—	9	5	—
8—9	2	2	2	—	—	—	—	—	—	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	1	—	—	1	—	1	—	—	—	1	2	—
	260	210	228	—	15	3	—	3	14	—	24	—	—	2	24	102	84	38	2	25	3	16	8	6	—	1	20	—	14	1	4	—	37	—	130	72	34
INFANTS' (GIRLS') SCHOOLS.																																					
3—4	7	4	3	—	1	—	—	—	1	—	1	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	2	1	2
4—5	74	54	60	—	13	—	—	—	5	—	7	—	—	3	3	32	23	5	—	3	—	2	3	1	—	—	4	—	2	—	1	—	9	—	26	17	13
5—6	72	57	63	4	14	1	—	—	2	—	5	—	—	5	8	24	28	10	3	7	—	5	2	4	—	—	6	—	2	—	2	1	11	—	36	24	16
6—7	42	35	39	2	4	1	—	1	1	2	4	—	—	1	3	19	16	4	2	6	1	2	5	—	1	—	2	—	2	—	1	2	5	—	25	15	7
7—8	14	12	14	—	6	—	—	—	1	—	2	—	—	—	2	8	6	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	3	—	12	3	2
8—9	4	3	3	—	2	—	—	1	—	1	2	—	—	—	1	3	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	1	—	1	1	1
9—10	1	1	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	—
	214	166	183	6	40	2	—	2	10	3	21	—	—	9	18	87	73	19	5	16	1	9	10	5	1	—	12	—	7	1	5	3	29	—	102	62	41
Totals all Ages, Boys and Girls.																																					
	1061	689	922	11	124	5	3	5	38	4	63	38	25	29	102	556	225	117	26	79	11	39	47	37	1	3	65	—	30	3	34	5	143	106	344	301	280

TABLE E. III.

			BOYS.	GIRLS.
St. Augustines'	Mixed	Boys	14	—
,,	,,	Girls	—	10
,,		Infants	7	7
St. Barnabas'		Boys	24	—
,,		Girls	—	27
,,		Infants	17	18
St. James'		Boys	51	—
,,		Girls	—	40
,,		Infants	46	38
St. John's		Boys	85	—
,,		Girls	—	71
Down Lane		Infants	28	21
Grosvenor	Mixed	Boys	17	—
,,	,,	Girls	—	30
,,		Infants	9	13
St. Luke's		Infants	32	28
Varney Street	Mixed	Boys	55	—
,,	,,	Girls	—	12
Basinghall		Infants	22	23
Royal Victoria		Boys	17	—
Holy Trinity		Girls	—	7
Christ Church		Girls	—	8
,,		Infants	4	4
King Charles		Boys	27	—
Murray House		Girls	—	30
,,		Infants	11	6
St. Mark's	Mixed	Boys	23	—
,,	,,	Girls	—	27
,,		Infants	10	8
St. Peter's		Boys	14	—
,,		Girls	—	14
,,		Infants	28	17
*Rusthall		Boys	1	—
,,		Girls	—	4
,,		Infants	54	32
Total			566	495

* The whole School was inspected in 1913; hence only new scholars were inspected in 1914.

In addition to the children whose Medical Schedules were completed during 1914, and apart from children seen at the School Clinic, a small number of children were re-inspected or specially inspected at the request of the teachers, or for other reason.

GENERAL DIRECTIONS TO PARENTS.

In 344 instances written or verbal directions were given to parents, while in 280 cases printed directions were sent. Medical or surgical treatment was advised in 301 cases.

SCHOOL CLOSURES.

During 1914 Infant Departments of Schools were closed on eight occasions for either measles or whooping cough, or a combination of measles and whooping cough. No Senior Departments of schools were closed during the year for infectious diseases.

HEIGHTS AND WEIGHTS.

A record of these was made in every case, and it is proposed when time permits, to establish from the figures for the present year and those of past years, since Medical Inspection commenced, a table of average heights and weights at the different ages ; this will prove of value in future inspections for purposes of comparison. Such a table will naturally be of value chiefly at the ages at which large numbers of Medical Inspections have been held, as a small number in a particular year of life cannot be considered fully representative for that age.

GENERAL RESULTS OF INSPECTIONS.

Defects found at Inspections are given in Table E. II. The introduction of this large table enables results of Inspections to be followed and compared under the various headings at one time.

WANT OF CLEANLINESS.

Condition of Heads.

Of the 1,061 children examined, 11 heads were infected with live vermin at the time of inspection, and 124 other children had nits; five children had dirty heads apart from the verminous condition. The nits are the eggs of the head vermin, and the number of cases in which these are present is a better criterion of the general condition of cleanliness or want of it than the number infected with live vermin, as it is usual for the parents to give their children a special clean up before the Medical Inspection. This "clean up" may dispose of live vermin, but it will not get rid of nits. The proportion of children found infected with vermin of the body at the Medical Inspection was small, being 0·28 per cent. In five cases only, was the body found to be in a dirty condition at the time of inspection.

A number of special visits were paid by the School Nurses for the object of inspecting the children's heads; 2,104 heads were inspected and 61 or 3 per cent. were found to be infected with vermin and 398 or 19 per cent. with nits. These proportions are rather large and varied greatly in the different schools.

It is to be hoped that with the energetic assistance given by the Head Teachers the per centage will be annually reduced until the appearance of a child thus infected at school will come, as it should, to be regarded as a rarity.

CLOTHING AND FOOTGEAR.

The number of children estimated as having defective clothing was 38 and in four cases the clothing was considered to be in a dirty condition. In 63 cases the footgear was considered to be defective.

VISION AND EYE DISEASES.

In 29 instances external eye diseases such as inflammation of the lids or conjunctivitis were noted. This number does not include cases of infectious conjunctivitis, or blight, which were not seen in the course of the ordinary School Medical Inspections. Where necessary, these children are now referred to Mr. Davies for treatment at the Health Office. Subnormal vision was noted in 63 instances; 18 cases received treatment and all children requiring further examination are now referred to the School Ophthalmic Surgeon.

MAL-NUTRITION.

In 102 instances or 10 per cent. there were evidences of mal-nutrition. It is necessary to point out that the term "mal-nutrition" has been widely interpreted to include children whose condition is below par from various causes; for instance, insufficient or unsuitable food, convalescence from illness, anæmia, ill-ventilated sleeping apartments, decayed teeth or nasal obstructions.

TEETH.

In the course of the ordinary inspection 781 children or 74 per cent. were found to have one or more teeth decayed, of these 21 per cent. had more than four decayed. No doubt a considerable proportion of the remaining 26 per cent. with sound teeth would be found, on more detailed inspection with a mouth mirror and probe, such as is carried out by the School Dentist, to have one or more decayed teeth; 57 children of the 781 found at the inspection to have decayed teeth, have received treatment. These figures are a striking illustration of the necessity for dental attention, of which the Committee has shown its appreciation by the recent establishment of Dental Treatment for the children under its care.

TONSILS AND ADENOIDS.

In 117 instances there was slight enlargement of the tonsils and in 26 instances marked enlargement. Adenoids were found to be present in 39 cases. Treatment was urged in those cases where the obstruction of the upper respiratory passages was sufficient to lead to mouth breathing, or where a history of recurrent sore throat was associated with the condition, or where chronic discharge of the ear existed. In 51 cases parents were advised to have these defects remedied; of these 17 left school and therefore were not followed up; of the remaining 34, 23 have received treatment.

GLANDS.

Glands were found to be slightly enlarged in 79 cases and markedly so in 11 cases.

EAR DISEASE.

Ear disease was noted in 47, and deafness in 37 cases. The daily syringing of ears where a profuse discharge occurred has, in a few cases been undertaken by the School Nurses since the commencement of the treatment Clinic. This is one of the conditions in which the treatment Clinic is of great value.

MENTAL DEFICIENCY.

A number of children were examined in the course of the year with a view to testing their mental capacity, and subsequent to my appointment as Inspector under the Mental Deficiency Act, during the months of October and November, four children were examined and reported upon to the Education Committee. Over an hour was devoted to the examination of each child.

HEART AFFECTIONS.

Morbid conditions of the heart were noted in 65 instances. The heart is examined as a routine practice in every case and many of the conditions discovered were indicative of debility or subnormal condition of health and would disappear on being rectified, nevertheless many were of rheumatic origin and accordingly appropriate advice was given, and the following leaflet on rheumatism was made use of, wherever it was deemed advisable :—

BOROUGH OF ROYAL TUNBRIDGE WELLS.

——:o:——

THE CONTROL OF RHEUMATIC FEVER.

——:o:——

Rheumatic attacks in children are very easily overlooked as the outward symptoms are usually quite trifling and likely to escape the notice of parents. At the same time these slight attacks may permanently damage a child's heart and produce very serious results in later life. Hence it is very important that treatment should be secured immediately for rheumatism in its earliest stages and mildest forms.

Symptoms which suggests that a child is suffering from the rheumatic poison :—

(1). Growing pains—especially pain in the hamstrings.
(2). Repeated sore throat or tonsillitis.
(3). Attacks of irritability, night terrors, twitching of face or fingers, or clumsiness in children not usually troubled in these ways.
(4). Certain rashes.

Precautions that should be taken with *rheumatic children* :—

(1). Keep *limbs* and body warmly but lightly clothed, preferably with woollen underclothing.

(2). Put child to *bed*, and obtain medical advice whenever feverishness, growing pains, sore throat, or other symptoms of rheumatism are noticed.

(3). Enlarged tonsils are better removed if a child suffers from repeated sore throats.

F.C.L.

Public Health Department,
Tunbridge Wells.

LUNG TROUBLE.

In no instance was tuberculosis of the lung diagnosed at a Medical Inspection, but a few children who might possible be tuberculous were kept under observation and re-inspected from time to time, and where it seemed advisable such children were sent to the Tuberculosis Dispensary in order that the necessary tests might be carried out for diagnosis in cases of doubt. In 30 instances other lung diseases were discovered, mostly cases of bronchial catarrh or acute bronchitis.

DEFORMITY AND SPINAL DISEASE.

In three instances minor degrees of curvature of the spine were discovered and appropriate exercises to remedy the condition were recommended ; 34 cases of other deformities, such as infantile paralysis or mal-formations, were discovered and where necessary appropriate advice was given in these cases.

COMMUNICABLE DISEASES.

Three cases of Diphtheria were discovered in the course of routine Medical Inspection, and there were also two cases of impetigo, or infectious skin disease.

This does not include cases of Diphtheria or other infectious condition discovered on making special visits to schools.

EMPLOYMENT.

In the case of the senior boys examined, enquiries were made as to the amount and nature of employment undertaken in addition to school attendance. It was found that of the 305 boys examined, 106 were employed in various occupations, for example, on early milk or paper rounds, or as house boys or errand boys. In many instances it was apparent that the employment was not necessary, but was undertaken with a view to obtaining pocket money. Where there were any signs of debility or strain, these extra duties were discouraged.

SCHOOL CLINIC.

In April, 1914, a full report on the question of the establishment of a School Clinic was presented to the Education Committee. This report was drawn up after careful investigation of the records of previous years with a view to finding out what percentage of children had received treatment for the various defects disclosed at Medical Inspections. As a result of these investigations a need appeared for the provision of treatment of :—

(*a*) Diseases of the teeth.
(*b*) Diseases of the eyes, and
(*c*) Minor ailments ;

The provision of a centre where the School Medical Officer might see children referred for any special examination, either by the Education Committee, or any of its officials, was considered at the same time. The report was approved, and it was then arranged that treatment should be undertaken for the above-mentioned conditions.

After consideration it was decided that the basement premises at Nos. 9 and 10, Calverley Parade, should be thoroughly reconstructed and utilised for the purpose of the School Clinic. A commencement was made with this re-construction during the summer months, and all was completed and the work of the School Clinic begun on December 1st, 1914. As the working period was thus so brief, I propose, instead of making a special report for the month of December, to include in the report for the year 1915, the detailed figures for the work of the Ophthalmic Surgeon and Dentist.

With regard to the examination of School children, this was undertaken at the Health Office prior to the definite establishment of the School Clinic, throughout the whole year, and a small beginning was made with the treatment of minor ailments. The following table gives particulars of the numbers of children examined; in many cases minor ailments were treated, and thus the number of attendances was, in some instances, large. The total number examined was 252; the total number of attendances was 641. These figures include 43 children whose teeth were attended to by the School Dentist, and 13 children were attended to by the Ophthalmic Surgeon, making 82 attendances.

TABLE E. IV.

NUMBER OF CHILDREN EXAMINED.

Ringworm.	Sore Throat.	Impetigo.	Ver. Heads.	Ver. Bodies.	Blight.	Otorrhoea.	Eyes.	Teeth.	Sundry Defects.	Total.
39	48	35	11	5	11	4	13	43	43	252

NUMBER OF ATTENDANCES.

Ringworm.	Sore Throat.	Impetigo.	Ver. Heads.	Ver. Bodies.	Blight.	Otorrhoea.	Eyes.	Teeth.	Sundry Defects.	Total.
136	107	82	24	22	29	15	82	43	101	641

The School Dentist, Mr. Price Evans, devotes two afternoons each week to the work of attending to the school children's teeth, namely, Monday and Thursday, from 2.0

to 5.0 p.m. The Ophthalmic Surgeon, Mr. Davies, devotes Thursday morning, each week from 9.0 to 11.0 a.m. to attending to the school children's eyes.

The School Clinic is held on Tuesday and Friday mornings when a large number of children attend for various conditions, such of them as require daily treatment being asked to come up on the intermediate mornings.

Ringworm.

Thirty-nine cases of ringworm were seen, and as at the end of the year some of these attended for treatment, they were responsible for 136 attendances.

It has been arranged that treatment for ringworm of the skin and mild cases of ringworm of the scalp shall be given at the School Clinic. Instructions for home treatment are given to the parents. In certain cases daily treatment is undertaken at the Health Office. For all pronounced cases of ringworm of the scalp, treatment by X-rays is the only certain method of eradicating the disease within reasonable time, and this is accordingly recommended to the parents.

Infectious Conjunctivitis.

A few cases of this disease, also known as Blight or Spring Catarrh, occurred in one or two of the schools. These schools were immediately visited, on the occurrence of the first case, and were kept under observation until all cases had been excluded, as this infectious condition of the eyes is extremely difficult to deal with, if it once obtains a hold in a school, and very often, unless it is promptly quelled, ends in the closure of the school for a long period.

ACTION TAKEN TO PREVENT THE SPREAD OF INFECTIOUS DISEASES.

Immediately on receiving notice of any infectious disease occurring in a house in which there are school children, if the disease be a notifiable one all children in the house are excluded from school; if the disease is not notifiable, all children from the Infant Department, and from the Senior Departments if such children have not previously suffered from the disease, are excluded. A large number of visits were paid in connection with the occurrence of such infectious diseases.

EXCLUSION OF CHILDREN FROM SCHOOL.

During the year in the course of Medical Inspection 22 children were excluded under Article 53 (B) of the Code. In addition 34 children were excluded, who were presented at School Inspections by Teachers for special examination on account of their health. This number does not include children excluded on account of the occurrence of infectious disease in the house, nor does it include children seen and excluded at the School Clinic.

NECESSITY FOR FURTHER TREATMENT.

It is probable that when the inspection of a considerable number of children under the Mental Deficiency Act is completed it will be necessary to extend and develop the Committee's arrangements for educating such subnormal children as are educable.

SPECIAL VISITS TO SCHOOLS IN CONNECTION WITH THE OCCURRENCE OF INFECTIOUS DISEASES.

Forty-seven visits were paid by the School Medical Officer to schools in connection with the occurrence of cases of infectious diseases. Over 1,000 swabs were taken from throats of school children and were examined bacteriologically during the course of the year, in addition a number of specimens of other natures were examined, *e.g.*, 26 specimens of hairs for ringworm.

WORK OF THE SCHOOL NURSES AND HEALTH VISITORS.

The School Nurses and Health Visitors have been employed in visiting houses where non-notifiable diseases have been reported, and in following up cases of children in whom remediable defects have been found, as well as assisting at the actual Medical Inspections. Since the commencement of the Clinic a considerable proportion of their time has naturally been taken up in assisting the different officers who are conducting the work. The work of the School Nurses and Health Visitors is set out in the following table :—

Visits to Houses where the following Diseases have occurred.	1st Visits.	2nd Visits.
Scarlet Fever	5	1
Diphtheria	66	25
Measles	59	33
German Measles	4	1
Mumps	5	1
Whooping Cough	28	11
Chicken Pox	1	—
Sore Throat	33	3
Ringworm (Scalp)	19	10
,, (Body)	1	—
Verminous Heads	24	3
,, Bodies	2	2
Impetigo Contagiosa	8	3
Infectious Eye Disease	9	—
Other Diseases	69	2
Totals ...	333	95
Visits paid to Elementary Schools for Medical Inspections	52	—
Number of children prepared for Medical Inspection—		
Newly Inspected	1061	—
Re-inspected	1	—
Specially Inspected	15	—
Other Visits to Elementary Schools ...	58	—
Home Visits arising out of Medical Inspections	426	255
Home Visits for other information ...	23	3
Dental Inspections at Schools	3	—

CHILDREN MAINTAINED IN SPECIAL SCHOOLS.

One child was maintained by the Education Committee in the Barclay School for Blind or partially blind children until 23rd January, 1914. The liability for her education has now been taken over by the L.C.C. as her parents have removed into their area. Another child has been maintained at the Brighton Blind Asylum since 15th September, 1914.

Mental Deficiency Act, 1913.

Under this Act the Kent County Council stated in November, 1914, that they would undertake the care of a child reported upon under this Act, and referred to their notice. Action with reference to others who were examined has been deferred pending the completion of the examinations of a large number in the Borough.

In conclusion, I beg to express my best thanks to the Committee for the kindly consideration and sympathy shown towards myself and my staff during the very considerable extension of the work of the School Medical Service which has been made during 1914.

I am,
Your obedient servant,
F. C. LINTON.